INSOMNIA AND IDENTITY: THE DISCURSIVE FUNCTION OF SLEEPLESSNESS IN MODERNIST LITERATURE

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INSOMNIA AND IDENTITY: THE DISCURSIVE FUNCTION OF
SLEEPLESSNESS IN MODERNIST LITERATURE

BY

SARAH KINGSTON

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This dissertation examines the topic of insomnia in British and American modernist literature, focusing primarily on the ways in which the condition of insomnia and the identity category of the “insomniac” intersect with other aspects of subjectivity, such as gender, occupation, race, and social class. Through examining insomnia from a narratological perspective, using fictional, philosophical, psychological, sociological, and medical literature, I discuss the discursive function of both this disorder and identity category during the Modernist period. It also explores the relationship between insomnia and Modernism itself, regarding both the discursive production of knowledge of insomnia and the insomniac during this period and the ways that the modernist literary text discusses, interprets, utilizes, and structurally reproduces phenomenological aspects of insomnia. Further, I argue that insomnia shapes identity, and therefore, perception, in a dialectical manner; as such, insomnia is a device of character and plot development. I consider the questions, “Why did those during this period, in America and the United Kingdom, need to define and interpret insomnia and the insomniac in the ways they did, and what are the literary and discursive implications of these interpretations?”

My introduction lays out my theoretical framework, arguing that sleep habits, behaviors, and practices (including insomnia) constitute a type of self care that intersects with other expected behaviors relating to one’s identity, sometimes creating or revealing a conflict between expected and “normal” behavior based upon generalized assumptions and individual will and desire. Further, I argue that while the diagnosis of insomnia and the label “insomniac” subject the individual to disciplinary and normalizing measures, this condition and label provide the individual
with a means of exposing and resisting assumed identity categories and the power to garner resources, time, and space for personal development and reflection. I explore the ways in the insomniac body reveals and challenges norms and normative procedures. Additionally, I provide an etymological inquiry into the origins of the word *insomniac*, and situate this term and its use historically—a produced identity belonging to a particular time and place with implications regarding the production of knowledge about individuals and the motivations behind producing such knowledge. Finally, I explain the relationship between the phenomenological and ontological experience of insomnia to the phenomenological and ontological experience of World War I in order to justify the war as a key turning point in the discursive production of the insomniac. The second chapter traces the production of knowledge of insomnia and, eventually, the insomniac through the nineteenth century until today, in an effort to further elucidate the significance of this condition and figure historically and currently. It considers questions of the origins of the modernist figure of the insomniac and the implications of this figure today.

The subsequent chapters focus on the intersection of insomnia with other aspects of subjectivity. Chapter three discusses the insomnia of soldiers and war workers during World War I, using the fictional texts *Parade’s End* by Ford Madox Ford, *A Farewell to Arms* by Ernest Hemingway, and *Memoirs of an Infantry Officer* by Siegfried Sassoon. This chapter argues that the experience of insomnia is, in significant ways, akin to the experience of participating in World War I, thus provides a useful device through which to discuss war experience and its related anxieties. Chapter four compares the diagnosis, perception, and treatment of insomnia in those
with differently gendered bodies. In this chapter, I argue that insomnia is a form of bodily inscription, revealing cultural norms and beliefs, as well as allowing the individual to expose and resist these norms. This chapter focuses on the Pilgrimage series by Dorothy Richardson, The Soul of a Bishop by H. G. Wells, and The Last September by Elizabeth Bowen.

The fifth chapter explores the relationship between insomnia and social status, specifically regarding class, occupation, race, and citizenship. As I argue in this chapter, insomnia is simultaneously demonized as a form of resistance to capitalist work ethics, represented as a marker of social privilege, and lauded as a time and space of insight and reflection. Further, insomnia reveals an anomic tension within the individual insomniac, indicating a conflict between his or her desires and capabilities within a given social structure. The literary texts covered in this chapter are F. Scott Fitzgerald’s The Beautiful and Damned, Waldo David Frank’s Holiday, and E. M. Forster’s A Passage to India. The final chapter discusses the relationship between insomnia and authorship, describing the ways in which the experience of insomnia is translated into the experience of creating and reading literature. The texts covered in this chapter are Vladimir Nabokov’s Lolita, James Joyce’s Ulysses, and Richard Wright’s Black Boy. In this chapter I argue that an affinity exists between the condition of insomnia and the structure of the modernist text, and a reading of the modernist text, to an extent, recreates the experience of insomnia in the reader. Essentially, this dissertation looks at insomnia as a battleground between various elements of one’s identity and subjectivity and explores the ways in which this battle both affects and is expressed in the literature of the Modernist period.
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The first course I took in pursuit of my doctorate at the University of Rhode Island was a seminar on British literature of World War I with Professor Jean Walton. On the first day of class, as Professor Walton discussed the requirements of the course and provided background on the Great War and its literature, I began considering topics for my final paper. During our class discussion, words like *anxiety, attrition, exhaustion, and fatigue* echoed in my mind, and I, “poor go-to-sleeper” (to borrow Vladimir Nabokov’s words) that I am and have been for as long as I can remember, had a moment of awakening: I would write about insomnia. From that very first class, Professor Walton has worked with me as I pursued my inquiry into insomnia and Modernism, helping me as I developed and refined my ideas and arguments. Her untiring efforts, input, dedication, and support have been essential to the completion of this dissertation, and for that, I am exceedingly grateful.

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CHAPTER 1

INTRODUCTION

In her essay “On Being Ill,” (1926) Virginia Woolf describes the way in which illness changes perception: “we cease to be soldiers in the army of the upright; we become deserters. They march to battle. We float with the sticks on the stream; helter-skelter with the dead leaves on the lawn, irresponsible and disinterested and able, perhaps for the first time for years, to look round, to look up—to look, for example, at the sky” (12). Her use of the language of war, with phrases such as “soldiers in the army,” “deserters,” and “march to battle,” is certainly deliberate, given the temporal proximity of World War I to the writing of this essay. On a practical level, illness, for many, did provide a respite from war, at least spatially, if not psychologically. Though Woolf initially seems to associate illness with disability and helplessness, with her use of images like desertion and floating “helter-skelter,” her language ultimately illustrates illness as a different sort of ability, an ability to observe life from a new, more insightful perspective. Perhaps she has a figure like Siegfried Sassoon in mind, who, through illness (both real and contrived), was granted separation from the war, enabling him to view it in a new way, as he describes in his semi-autobiographical war text, Memoirs of an Infantry Officer. Illness has the function of separation; one is parted from the rest of society, and, therefore, able to view it from a different vantage point.
More importantly, however, she is writing of the ontological power of illness, to change one’s way of thinking; through illness one can see “how the world has changed its shape” (8). Illness, for Woolf, becomes “the great confessional” in which “things are said, truths are blurted out, which the cautious respectability of health conceals” (11). Her phrase those “great wars,” echoes the Great War itself, the cause of mental and physical illness for many. The solitude of illness, its ability to remove the sufferer from daily habits and responsibilities, allows for contemplation, and consequently, revelation. As Miriam Henderson thinks in Dorothy Richardson’s chapter novel *Deadlock*, “[Solitude] was necessary, for certainties. Nothing could be known except in solitude” (3: 63). World War I, with its resultant physical and emotional scars, provided illness and its consequent solitude *en masse* in such a way that it altered the consciousness of nations.

Insomnia, not necessarily an illness by itself, but a symptom of many, fits well into the paradigm Woolf envisions. It renders one conscious and isolated within the bed, making one view the world from said bed, rather than through a more active form of participation in the external world. Additionally, insomniac consciousness is different from regular, daytime consciousness, as it is void of the distractions and activities which shape daily thought. As Elizabeth Bronfen argues, “Insomnia, calling forth a state of psychic tarrying, transforms the time between dusk and dawn into a poignant nocturnal countersite to the logic of the ordinary everyday” (159). She continues, “[Insomniacs] are compelled to endure a state of body and mind that severs them from the consciousness of the day” (160). Woolf’s description of the ill person as “[floating] with sticks on a stream,” reminiscent of William James’ model
of consciousness itself as a stream (described in his essay “Stream of Consciousness”) accurately describes the thought process of insomnia, in which thoughts float by seemingly at random. For example, in an essay about insomnia, “Lying Awake,” Charles Dickens describes his multiple failed attempts during a bout of insomnia to focus his mind on sleep: “But, Sleep. I WILL think about Sleep. I am determined to think (this is the way I went on) about Sleep. I must hold the word Sleep, tight and fast, or I shall be off at a tangent in half a second. I feel myself unaccountably straying, already, into Clare Market” (1). Throughout the rest of the essay, Dickens describes the stream-like movement of his thoughts, which range from politics, to places he has visited, to family members, to death, until he eventually decides sleep is futile and decides to take a late-night walk (4). This essay illustrates Woolf’s point about the randomly contemplative nature of illness, which, as she argues, allows words to “possess a mystic quality. We grasp what is beyond their surface meaning” (21). As Dickens attempts to focus in on the word “Sleep,” it becomes sort of a talisman for him, but because of his insomnia, he realizes that his grasp of sleep is only fleeting. Here, Dickens’ thoughts are clearly motivated by his insomnia and he is writing through his symptoms, as Woolf envisions in her essay. Most significantly, however, his insomnia shapes the flowing nature of his thoughts.

Dickens, of course, is a figure of the nineteenth century. But, because of the Great War, and its related traumas, which I will discuss in more detail to come, the experience of insomnia became much more widespread in the early part of the twentieth century. As physician Guthrie Rankin argues in his 1918 article, “Broken Sleep,” “This terrible war has exacted from those who participate in its activities, as
well as from those who ‘watch and wait,’ an enormous toll of misery both by day and by night” (77). He continues, “Peace of mind and safety of body, being alike imperilled, sleep, which is the guardian of both, has become fickle and unsatisfying” (77). After the war, insomnia became seemingly endemic, as did its related influence on thought and perception. Fortunately, as Woolf suggests, a lot can be learned from and expressed through such a condition. In this sense, insomnia becomes a productive force, allowing for a new time and space from which to contemplate and interpret one’s experience.

**Insomnia as Activity**

Yet, despite this seemingly productive type of insomnia, not all individuals see the traditional awake-in-bed type of insomnia, or its relief in sleep, in such sympathetic terms. In 1914, Thomas Edison proclaimed, “Sleep is an absurdity, a bad habit. We can’t suddenly throw off the thralldom of habit, but we shall throw it off” (qtd. in Derickson 1). Edison, notorious for his insomniac work habits, fully embraces the “moral opposition to any idleness,” which “informed a Protestant work ethic that celebrated perseverance at one’s vocational calling and implicitly denigrated sleep as a form of idleness” (Derickson 2). Time not sleeping, then, for figures like Edison, was not best used in bed, thinking, but rather better spent actively working. According to Alan Derickson, Edison is “the paragon of modern sleeplessness to legions of journalists, commentators, and other historians. No American has done more to cast sleeplessness in hegemonic terms. None did more to frame the issue as one of simple choice between productive work and unproductive rest” (5). Edison’s most famous invention, the light bulb, became the double-edged
sword of the insomniac. On the one hand, the light bulb permits people to work through all hours of the night, allowing them to labor at times more suited to individual preference; one who prefers to work when everyone else is asleep can now do so with relative ease. On the other hand, the light bulb permits people to work through all hours of the night; thus, no time exists when one cannot be working, whatever the nature of that work may be, whether by choice or requirement. Rest, then, is no longer built into the daily cycle when the light that facilitates work fades away, but requires a willful decision to stop working.

Starting near the turn of the twentieth century, insomnia takes on a new dimension. Not only is insomnia not sleeping when one ought to be or wants to be sleeping (under the proper conditions for sleep—not sleeping, even though one may want a nap, during a boring meeting is not insomnia in Western culture), but now it is also not sleeping with the knowledge that something other than sleeping can, and probably should, be done. In a capitalist paradigm of maximized, perpetual productivity, insomnia in the traditional sense (lying in bed, staring at the ceiling, cursing one’s inability to sleep, experiencing the flow of thought) is pure waste, contributing neither to active production, nor to recuperative rest needed for optimal productivity. For any insomniac who has suffered repetitive thoughts of what one hopes to accomplish or should accomplish, or in other words, how one can better be using one’s time than lying awake in bed hoping for sleep to come, it is clear that such thoughts are not conducive to rest. As F. Scott Fitzgerald puts it in his essay, “Sleeping and Waking,” during his bouts of insomnia, he experienced a sense of “Waste and horror—what I might have been and done that is lost, spent, gone,
dissipated, unrecapturable” (67). His insomnia is spent regretting what he has failed to accomplish. In this context, the insomniac has two options: to feel guilty over wasted time, as Fitzgerald does, or to forego the possibility of sleep (or at least time in bed) for “productive” activity and learn to cope with the resultant exhaustion.

One of the other most admired figures of the early twentieth century, Charles Lindbergh, like Edison, was lauded for his ability to embrace the latter approach. Lindbergh’s solo trans-Atlantic flight was largely discussed in media of the period as a story of a man’s ability to conquer the bodily need for sleep. As Derickson argues, “Sleeplessness immediately became an integral part of the storyline,” and one of Lindbergh’s backers attributed his ability to sustain wakefulness to his “resilient constitution . . . and rigorous self-discipline” (12). Gaining international acclaim, Lindbergh did his best to downplay the effects of fatigue during his flight of more than thirty-three hours, and despite visible signs of grogginess upon landing, he claimed, somewhat dubiously, that he was “not sleepy at all” (qtd. in Derickson 13). Lindbergh, like Edison, became a model of man’s ability to overcome fatigue for the sake of accomplishment.

I use the phrase “man’s ability” intentionally, here, as women’s sleeplessness was viewed in a much different light during this period. As A. W. MacFarlane argues in his 1891 text *Insomnia and Its Therapeutics*, “Men require less sleep than women. . . . As a rule, the female possesses more nervous excitability, and being more impressionable than the male, she requires more sleep for the restoration of her energies” (40), which is problematic because “women bear the strain of life less buoyantly than men, and so are more liable to insomnia” (41). Slightly later in the
text, he seemingly contradicts himself, arguing that “Women . . . bear the loss of sleep better, for a time, than men” evidenced by “the length of time they can devote themselves to night-nursing in response to the calls of affection or duty” (41). Yet, he resolves this contradiction by distinguishing between the loss of sleep of motherhood and the insomnia of general feminine susceptibility. In other words, women can only handle lack of sleep because motherhood requires it; outside of motherhood, insomnia is particularly harmful to women who typically require more rest than men because they are essentially weaker and less able to cope with life’s conflicts. Insomnia is paradoxically a consequence of and threat to motherhood, which is MacFarlane’s tacitly assumed role for women. Governmental regulations on work from the early twentieth century apply the same principles as MacFarlane to the sleep of women. Despite the fact that women, often the primary caregivers of children and other family members, were often required to keep late hours in order to care for their children or the sick, they were subjected to more rigorous controls over hours worked outside of the household because their fatigue was thought to interfere with their ability to bear and care for children, which many viewed as dangerous to society (Derickson 27). Broadly speaking, motherhood and sufficient rest are far from synonymous, yet, while men struggled for more controls over the length of the working day in the early half of the twentieth century, women struggled to be allowed to work as many hours as men (Derickson 27).

**Insomnia and Contemplation**

Regardless of gender disparities, if we look to literary texts of the early twentieth century, we will see that the dichotomy of insomnia I have just drawn, a
choice between “productive” sacrifice of sleep or time “wasted” in insomniac futility is a false one, as Woolf’s essay indicates. Literature and philosophy present us with a third option. Inasmuch as insomniac time is a time for thought—if one is not sleeping or doing other work, one has no choice but to think— it allows for a different type of productivity. For the philosopher Emil Cioran, writing in 1934, insomnia, painful as it may be, is a means of attaining knowledge. He writes, “The importance of insomnia is so colossal that I am tempted to define man as the animal who cannot sleep. . . . God punished man by taking away sleep and giving him knowledge” (85).

Laziness, the ability to forego worldly productivity perhaps by lying idly in bed, is essential for insight, according to Cioran who “[prefers] an intelligent and observant laziness to intolerable, terrorizing activity. To awaken the modern world, one must praise laziness. The lazy man has an infinitely keener perception of metaphysical reality than the active one” (105). The latter Cioran quotation in this section came from a chapter from his text From the Heights of Despair, tellingly entitled “Degradation through Work,” in which he argues for work’s “tendency to dull the spirit” making the perpetual worker the “impotent slave of external reality” (104). The most valuable time, for Cioran, is neither time working nor time sleeping, but time of thought and isolation, made possible through insomnia.

Cioran’s expression of the value of insomnia is in direct opposition to that of Edison, Lindbergh, and their admirers. Insomnia need not be either time wasted or time for even more work. For the capitalist, insomnia can have either a positive or negative value. Its value is positive if it is “productive” time, negative if “wasted” time. As E. P. Thompson argues, “In mature capitalist society, all time must be
consumed, marketed, put to use; it is offensive for the labour force merely to ‘pass the time’” (90-91). For the doctor, insomnia’s value comes as a symptom pointing to a larger, hopefully curable, condition (insomnia is almost never only an exclusive condition), but is negative in the sense that it detracts from overall health and well being (factors necessary for “productivity” in the capitalist sense). Yet, for the literary or philosophical writer, insomnia’s value lies in its capacity to isolate the individual in a state of virtual immobility, resulting in a time devoted to thought and insight. Insomnia, then, helps authors shape their perceptions of the world, which is then transferred to their texts. For this reason, insomnia becomes an important literary device when conferred upon a character, a time during which the character can contemplate sources of anxiety, motivation, suffering, or happiness—to explore his or her world and place in it.

However, as Cioran and Woolf also argue, insomnia is not simply a time for thought, but allows for thought that alters one’s perception of the world. It is dialectical: it shapes identity, which shapes perception. Fitzgerald recounts a conversation in which someone says, “The world only exists through your apprehension of it” (“Sleeping” 74). When one’s apprehension of the world is filtered through insomnia, insomnia necessarily shapes that apprehension. Further, insomnia reflects one’s struggle with his or her identity. Maurice Blanchot writes, “To sleep badly is precisely to be unable to find one’s position. The bad sleeper tosses and turns in search of that genuine place which he knows is unique. He knows that only in that spot will the world give up its errant immensity” (Space 266). For the author or character attempting to explore and forge an identity, insomnia is a
useful and necessary tool, indicating both the search for the self and the knowledge that the self has been misplaced.

This conception of insomnia, as both productive conceptually and reflectively, counters the traditional conception of sleep and insomnia as related to economic productivity in the capitalist model. As Blanchot argues, “the workplace is everywhere; work time is all the time. When oppression is absolute, there is no more leisure, no more ‘free time.’ Sleep is supervised” (Disaster 81). In such a model, supervised sleep means insomnia must be corrected and sleep must be normalized to meet the needs of the larger society rather than the individual, or, in other words, the individual’s need to function within the larger society. As we see will in the literary texts I will discuss, insomniac characters often receive push back: advice on how to sleep better, lectures on the need for sleep, inquiries into mental and physical health, and numerous forms of corrective measures, medical or otherwise. The body becomes the battleground between warring factions: the character who “needs” insomnia for insight and development, to find his or her own, rather than prescribed place, and the society (or family or army) that needs the character to sleep well.

**Sleep Discourse**

The physiological need for sleep, despite its temporal and spatial variations for individuals, is one element of life that has remained relatively consistent throughout the course of human existence; however, the discourse regarding sleep fluctuates contingent upon the conditions of the given historical period and cultural group. For reasons that we have yet to fully explain and still debate, all people seemingly require sleep to survive and have for human history thus far, yet the
concept of sleep represents much more than simply something one needs to do regularly. In addition to discursive representation of sleep as a biological necessity, as the literature I will examine indicates, sleep habits and failures are also related to issues of psychological well being, physical and emotional strength, morality, gender roles and expectations, and self-control. The importance of sleep, for personal, medical, and societal reasons, can be illustrated by examining the way both an individual and the social group of which he or she is a part react when that individual fails to sleep in a way that the larger culture deems proper and appropriate, a condition we currently refer to as insomnia. Therefore, examining the discourse that produces understandings of the condition of insomnia and the insomniac as an identity category reveals not only a great deal about the relationship of the individual to his or her own body and mind but also of the individual to the larger society. Such an examination of sleep habits and failures reveals a great deal of tension between the individual’s will and desire and the expectations placed upon that individual inasmuch as they govern the seemingly “private” (isolating) behavior of sleep.

In his essay “The Ethics of the Concern of the Self as a Practice of Freedom,” Michel Foucault provides a useful model through which to explore the way in which the discourse of insomnia has been historically produced. Using the concept of “madness” as an example, Foucault explains his epistemological concerns: “[His research] was a question of knowing how madness, under the various definitions that have been given, was at a particular time integrated into an institutional field that constituted it as mental illness occupying a specific place alongside other illnesses” (297). My exploration of insomnia will be similar: my goal in this dissertation is to
illustrate how, but more importantly, why, insomnia “at a particular time” (the period
directly preceding and following World War I—the period of literary Modernism),
came to be constituted as a disorder, but more significantly a disorder that specifically
identifies and categorizes an individual, “occupying a specific place” alongside other
disorders and deviant identity categories in ostensive need of normalization.

Before 1907, the “insomniac” did not exist. Certainly, as sleep historians like
A. Roger Ekirch and Eluned Summers-Bremner assert, history is laden with both
famous and anonymous individuals who have, at times, suffered from or reveled in
troubled, reduced, or broken sleep. However, the communal need to classify such
individuals through the use of language into an identity category, thereby creating a
new semantic understanding of the relationship between sleeplessness and identity,
was not apparent in the English language until its formal introduction into medical
discourse in a 1907 lecture by physician Alexander Morison, entitled “A Lecture on
Sleep and Sleeplessness.” This lecture was printed in the British medical journal The
Lancet in 1908 under the same title (OED). It introduces the “insomniac” in the
following quotation: “[An increase in urinary secretion] is, like the phenomenon of
sleeplessness, most evident in the neurotic insomniac” (OED). The coining of a new
label and this quotation’s implications are significant. The focal point of insomnia
itself has shifted from an event or state happening to a person to a specific identity
category. In other words, the inability to sleep is now regarded not as an external
condition but as an internal trait; the label itself allows for a person to be solely
defined in terms of his or her insomnia. When sleep habits are deemed faulty or
abnormal, as with insomnia, they are then subject to scrutiny and normalization, from
the medical discipline in this particular instance. But more significantly, not only are the insomniac’s sleep habits called into question, the insomniac himself or herself becomes the subject of inquiry.

With regard to the process of normalization, an informative parallel may be drawn here between the insomniac and the criminally delinquent. Foucault argues that in the case of the criminal, delinquency is seen as an attribute of the person rather than merely a consequence of the crime; thus, the individual, rather than the offense, becomes the subject of scrutiny (*Discipline* 252). In other words, in the view of disciplinary authorities (medical, educational, criminal, religious), something about the person, independent of the actual crime, caused his or her delinquency—the same case can be made for the insomniac. Arguably, one is not an insomniac simply because one cannot sleep, but because some other attribute of one’s personality or physiology causes one to become an insomniac. Foucault writes, “The delinquent . . . is not only author of his own acts (the author responsible in terms of certain criteria of free, conscious will), but is linked to his offence by a whole bundle of complex threads (instincts, drives, tendencies, character)” (*Discipline* 252-53). Through the act of labeling the “insomniac,” the individual is now implicated, and perhaps even blamed, in his or her own insomnia and also represented as responsible, to an extent, to the larger society for treating the problem. This semantic shift indicates a larger practice in medical discourse rooted in attributing “unhealthiness” to some flaw of personality, character, history, or constitution, and is evident in both the aforementioned novels and medical literature of the time.
Etymology of the Insomniac

To be fair, Morison was not the first to use the word *insomniac* to describe a sleepless individual hoping for a “normal” night’s rest; however, he was the first physician to have his use of this label recorded and introduced into the medical discipline. The word *insomniac* has been used colloquially a handful of times prior to Morison’s lecture. The first such instance I could trace comes from the “Household Matters” section of the 5 February 1887 edition of *The Leeds Times*, written by “A Yorkshire Housewife.” Her article, sandwiched between the “Fashion and Dress” and “Recipes” columns, cites the advice of several medical authorities on the treatment of insomnia, but the use of the word *insomniac* appears to be her own creation. She writes, “In exceptional cases [of sleeplessness] the insomniac makes a fair recovery” (6). Despite the anonymity of the author of this article, as well as its less-than-prominent placement on the sixth page of a local newspaper, the “Housewife’s” column makes several important points about causes and understandings of sleeplessness that will persist for the next several decades. Firstly, she asserts, mostly through the citation of medical authorities, the negative consequences of prolonged, untreated insomnia, including confusion, indecision, and nervousness (6). She uses the pronoun “he” to describe the poor sleeper, emphasizing the male as the normal standard of judgment, but claims, as do physicians contemporary to her, that young women, especially those who have the “bad habit of taking too limited a supply of sleep, at irregular hours” are the most prone to and most negatively impacted by the effects of insomnia (6), an assertion Richardson’s character Miriam comes to resent. The author also equates insomnia with mental
overwork, lack of exercise, and poor nutrition (6). Her proposed cure is either through the use of prescribed drugs or through the regulation of one’s sleeping habits (6). In short, within her article this “Housewife” summarizes much of the contemporary medical discourse on the causes and treatments of insomnia.

The next instance of usage of the word *insomniac* comes in a creative non-fiction piece in the 7 July 1888 section of the *Manchester Courier and Lancashire General Advertiser*, entitled “Our Domestic Circle,” by an author identified only as “Beryl.” “Beryl’s” short narrative about an experience of insomnia is of particular interest in that this individual claims to have invented the term. Beryl writes, “I should have been told that I was suffering from this insomnia. Luckily for me, I am neither, viz., a person of consequence nor an insomniac—excuse the word. I have coined it expressly for the occasion, feeling sure that the Goddess of Sleep in her coyness will pardon any words she may put me in a strait for” (5). Beryl’s claim of authorship of the term *insomniac* suggests that this word was not in common, if any, usage at the time. The definition the article provides implies not only sleeplessness, but chronic sleeplessness, is associated with being “a person of consequence,” echoing MacFarlane’s assertion that “idiots, the feeble-minded, and even healthy persons whose brains are inactive, sleep much longer than active-minded men” (28). Beryl illustrates further inventiveness through the possible creation of the “Goddess of Sleep.” In Roman and Greek mythology, sleep was a male god, Somnus or Hypnos respectively. Hypnos’s wife, Pastithea, is the goddess of rest, but is also associated with hallucinations or hallucinogens rather than sleep itself. Perhaps, Beryl is referring to the Norse goddess of the night, Nótt, but provides no evidence
for this association. Regardless, the choice to feminize sleep is an interesting one, perhaps related to contemporary discursive views of the need for sleep as a form of femininity or weakness.

Two more instances of the use of the word *insomniac* occur in British newspapers prior to the 1908 usage the *Oxford English Dictionary* cites as the word’s first appearance in print. The first of these two is in a short poem from the “Comic Cuttings” section of the 31 May 1894 edition of *The Yorkshire Herald, and the York Herald*. An author named only “Putch” uses the word in the title of a poem called “Impromptu by an Insomniac.” The text of the poem is as follows:

(In the small hours, after long sleeplessness).
Ah! Labour—that slumbers—may say its long say
On the boon—or the bane—of an Eight Hours day;
But what should I hail with ecstatic delight
Would be, oh sweet Somnus! a sound Eight
Hours Night! (6)

This poem reinforces the importance of eight hours of sleep, commonly thought to be the ideal amount for most adults, but also puts this eight hour sleep in contrast with the eight hour work day. In doing so, the poem points to the necessity of sleeping at night for laboring during the day. Thus, sleeping night is, in essence, merely an extension of the working day, enabling one to cope with the necessity of labor.

The final instance that I found prior to 1908 is in an article entitled “A Cure for Insomnia” from the 13 February 1896 edition of London’s *Morning Post*, in a letter to the editor by Alice M. Werge. Werge encourages the use of technology to cure insomnia, specifically in the form of a machine (which she would hypothetically invent) designed to rock a bed back and forth, thereby simulating the rocking cradle in which an infant sleeps. If a mechanized bed is too expensive, she claims a more
cost-effective rocking footstool placed near a comfortable chair might serve the same purpose. However, if these items either do not work or are financially unattainable, “The insomniac may lie on either side, the knees resting on each other, the feet ditto, the toes firmly fixed on the tightly tucked in sheet, then with them sway the body gently” (2). Werge’s assertion of the ability of technology to cure insomnia reflects the prominence of technological advancement in Victorian society. As I will discuss in the chapters to come, new technologies, including the use of electricity, were often embraced as a means of treating disorders, including insomnia.

What these four appearances of the word insomniac have in common is the relative anonymity of the authors, all but three lacking a full name as identification. Similarly, none of the authors are in the medical profession (at least none claim to be). They all use the word as a noun, in the same way it will come to be used medically, and use it to point to a chronic condition of sleeplessness. Further, in varying manners, they all assert the necessity of treating this type of individual, whether that treatment is to prevent one from feeling confused and nervous, to prepare one for work, or to provide one with the innocent and childlike rest of comfortable slumber, thereby relating sleep requirements to mental health, work, and morality. However, most significantly, right from its invention as a term, even when spread out over various and somewhat random sources, the insomniac is always heavily tied to contemporary discourse. He (or, she, less commonly as male is the assumed norm) is never simply presented on his (or her) own terms, but related to gender, labor, mental illness, moral strength, and technology.
That said, the research I conducted included a scan of an archive of millions of British newspaper articles dating back to the seventeenth century and a selection of major American newspapers dating back to the mid-eighteenth century, just prior to the Revolutionary War. Aside from those four instances of the word appearing in print before 1908, I could find nothing before the 1887 British article and nothing whatsoever in American newspapers. Of course, while it is possible to prove that something has occurred, it is much more challenging to prove that it has not, or, in other words, that no one in any time prior to 1887 has ever used this word. So, perhaps other examples exist. But clearly, the fact of the apparent emergence of the word in this specific historical period of the late nineteenth century, and more importantly its emergence in medical discourse of the early twentieth century soon thereafter, is historically significant. As Foucault traces the origins of the madman, I am doing the same with the insomniac, beginning with its emergence in discourse.

**Production of Knowledge**

Through its appearance in language, the word *insomniac* enables the individual to be constituted as an insomniac on the basis of his or her sleep habits. Foucault explains the process of producing the individual within a diagnostic category using the example of hysteria:

> Hysteria, which was so important in the history of psychiatry and in the asylums of the nineteenth century, seems to me to be the very picture of how the subject is constituted as a mad subject. And it is certainly no accident that the major phenomena of hysteria were observed precisely in those situations where there was a maximum of coercion to force individuals to constitute themselves as mad. On the other hand, I would say that I am now interested in how the subject constitutes itself in an active fashion through practices of the self, these practices are nevertheless not something invented by the individual himself. They are models that he finds in his culture and
are proposed, suggested, imposed upon him by his culture, his society, and his social group. (“Ethics” 291)

Similarly, the coining of the term *insomniac* and diagnoses and treatments of insomnia coerce the individual into adopting this identity and owning its implications; yet, the subject himself or herself plays an active role in constituting the self as an insomniac, through his or her practices of the self—practices which are socially, culturally and medically mediated.

My intent is to explore the conflicting ways in which the literature of the Modernist period becomes a battleground for the purpose and value of insomnia and regulation of sleep as a “practice of the self” and a “practice of self formation.” Foucault’s concept of “care of the self,” which he defines as “an exercise of the self on the self by which one attempts to develop and transform oneself, and to attain a certain mode of being” (“Ethics” 282) becomes a valuable way through which to argue that sleep habits are a form of self care, which, in effect, enable the individual to prioritize which self requires the most attention. Foucault argues that the self is not unified; one has a multiplicity of selves reflecting the various roles one has in life: employee, family member, citizen, and so forth. Thus, how one comes to define “care of the self” reflects not only how one wants to go about developing oneself, but what “self” one wants to develop, a hierarchical prioritization of one’s numerous roles—this issue, which “self” should take precedence and receive the most “care,” is the issue at stake in medical and literary narratives. In medical narratives, the self that deserves the most care is the social self: the employee, parent, citizen. Yet, oftentimes in literary narratives, the self that deserves the most care is the inner,
creative or intellectual self: the student, artist, poet, philosopher—that part of the self that performs the “work” of interpreting experience.

The insomniac comes to represent a body and mind in conflict during a specific historical time and place. It is an identity category produced just prior to the start of World War I, and one that I will argue is, like WWI a culmination of processes of medical and scientific advancement as well as the rationalization of both industry and, eventually, warfare. Because of the war, the significance of the category of the insomniac takes on a heightened meaning because of its rootedness in conflict between personal obligations and social obligations. This conflict of the prioritization of the self becomes all too apparent when the self is also a soldier or war worker serving his or her country. Care of the self takes on a role beyond merely being “successful” at earning money or raising a family, but instead includes implications not only for individual life and death, but also for the prosperity and survival of whole nations relying on individuals to devote their “selves” (bodies and minds) to the war effort. World War I, often noted being temporally related to the origin of Modernist period, a notion with which I agree for reasons I will explain to come, became a sort of turning point in the history of psychology (as the medical discipline produced studies of shell shock and its related conditions), in part because of a change I have noticed in literary texts about the nature of insomnia (post-WWI insomnia often involves reliving or recreating traumatic or regretful memories or fearing sleep because of its likeness to loss of self and death), and in part specifically because of the shift in emphasis in literary texts of the nineteenth century from
unconscious states (dreams, trances, somnambulism) to insomnia in literary texts of the twentieth century.

**Insomnia in Literature**

The difference between the presentation of insomnia in literary texts of the nineteenth century and those written in the twentieth, during and after World War I, reveals a shift in the nature of the insomniac’s anxiety, or, in other words, what is keeping a character awake. Often, in nineteenth century texts, the anxiety depicted in scenes of insomnia is an anxiety over the future. Take, for example, the following passage from Charles Dickens’ novel *Great Expectations* (1860-61):

> If I [Pip] slept at all that night, it was only to imagine myself drifting down the river on a strong spring tide, to the Hulks; a ghostly pirate calling out to me through a speaking-trumpet, as I passed the gibbet-station, that I had better come ashore and be hanged there at once, and not put it off. I was afraid to sleep, even if I had been inclined, for I knew that at the first faint dawn of morning I must rob the pantry. (15)

In this passage, Pip describes his anxiety prior to his impending robbery of his sister’s pantry as demanded, on threat of his life, by Magwitch. The passage incorporates a sense of uncontrollable forward movement (“driving down the river on a strong tide”) in the direction of imminent demise. He is unable to sleep not because of the knowledge of what he has done, but what he must do in the future. He fears sleep, but not because he will lose himself in sleep, but may lose himself to his future actions. His insomnia is an insomnia of anxiety over the future.

In another example from the same text, Pip awakens at night and is unable to return to sleep. Pip narrates:

> As I had grown accustomed to my expectations, I had insensibly begun to notice their effect upon myself and those around me. Their influence on my own character, I disguised from my recognition as
much as possible, but I knew very well that it was not all good. I lived in a state of chronic uneasiness respecting my behavior to Joe. My conscience was not by any means comfortable about Biddy. When I woke up at night . . . I used to think, with a weariness on my spirits, that I should have been happier and better if I had never seen Miss Havisham's face, and had risen to manhood content to be partners with Joe in the honest old forge. (302)

As in the passage discussed earlier, Pip’s insomnia is related more to his fear of the future than to his past. Certainly, he contemplates his previous ill-mannered and selfish behaviors with regard to Biddy and Joe, yet only insofar as these behaviors represent the direction in which his character seems to be taking as time progresses. His regrets over the past are limited to his fears over the type of person they suggest he is becoming, rather than has already become. He believes his manhood and character would have been better served had he taken a different direction in life, only because he sees himself as not becoming the person he wishes to be in the future.

Charlotte Brontë’s novel Jane Eyre (1847) includes a similar example of a character unable to sleep because of anxiety over the future. In the passage cited below, Jane has insomnia on the eve of her soon-to-be-botched wedding to Mr. Rochester. Brontë recounts Jane’s thoughts:

This prediction [of blissful slumber] was but half fulfilled: I did not indeed dream of sorrow, but as little did I dream of joy; for I never slept at all. With little Adèle in my arms, I watched the slumber of my childhood—so tranquil, so passionless, so innocent—as soon as the sun rose I rose too . . . . She seemed the emblem of my past life; and he I was now to array myself to meet, the dread, but adored, type of my unknown future day. (208)

As with Pip, Jane is reminded of her past during her futile attempt at sleep. Yet, these memories are not the reason for her inability to sleep. Instead, her anxiety over her
future union with the “dread” Mr. Rochester keeps her awake. Her past, in its “emblematic” form, slumbers peacefully, but her future self induces insomnia.

We can see a similar pattern of insomnia based in anxiety in American literature. For example, Lily Bart, protagonist of Edith Wharton’s *The House of Mirth* (1905) often suffers from insomnia. In one case, Wharton describes Lily’s thoughts, as she “lay in the darkness reconstructing the past out of which her present had grown” (28). As with Pip, Lily’s insomnia focuses on her past, but only in order to view her life teleologically. She is not haunted by past memories, but her present and future, so like Pip and Jane, the person she will become. The past is only significant inasmuch as it affects her present and future situation. The occurrence of Lily’s insomnia comes after she spends (and loses) more money at cards than her budget allows. She is anxious over her economic condition and her future prospects. This fear of the future keeps her awake; thus, her anxiety is based in the future, even when her thoughts focus on her past.

Perhaps the reason for this future-centric, teleological form of insomnia as depicted in these pre-WWI texts has a lot to do with pre-WWI fears of the future. The nineteenth century was a time of great change in both the United Kingdom and America. These nations were industrializing and urbanizing, thereby drastically changing the day-to-day lives of citizens. Technology was developing rapidly, and in the second half of the nineteenth century we see such advances as the introduction of the railways (and Railway Standard Time) and widespread use of electric lighting, enabling people to both be out in public and perform labor, whether domestic or professional, at night. Additionally, the countries were expanding geographically
through conquest of colonial lands. Further, especially in the latter half of the nineteenth century, we see changes within the domestic sphere, with women assuming a more public presence and petitioning for the right to political involvement, as with the Women’s Suffrage movement, which gained a great deal of social and political traction during the end of the nineteenth century.

Fears associated with these technological, scientific, and social changes are reflected in the literature of this period. For example, texts such as H. G. Wells’ *The Invisible Man* (1897) and Robert Louis Stevenson’s *Dr. Jekyll and Mr. Hyde* (1886) describe fears of the scientist overstepping the laws of nature and unintentionally creating something monstrous and uncontrollable. Similarly, fears of the consequences of colonial expansion are present in texts such as Edgar Allan Poe’s “Murders in the Rue Morgue” in which a colonial import, an ourang-outang from Borneo transported by a sailor, escapes control of his (white, male) master and murders two virginal white women living in their seemingly impenetrable apartment (late at night). One reading of Poe’s story is as a tale of fear of the uncontrollable other, brought back from colonial realms and unleashed in Western society. Sadly, one common association made in Poe’s time (and specifically by one of his friends, Thomas Dew), is the equation of the black man with a beast. According to Dew, with “the free black . . . the animal part of the man gains victory over the moral” (qtd. in Dayan 243) and in this story we see the destructive power of the ourang-outang once he frees himself. Joan Dayan argues that “Poe’s reconstructions depend upon experiences that trade on unspeakable slippages between men and women, humans and animals, life and death” (244). In this story, Poe depicts the ape both as human
(trying to shave, to speak, to conceal its crimes), and unspeakably inhuman, because in the brutal nature of the murder “there was something . . . altogether irreconcilable with our common notions of human action” (Poe 26). The ape symbolizes this slippage between human and animal, the type of slippage that becomes possible through colonial domination when one race tries to take possession of another, dehumanizing the colonized (and the colonizer) in the process.

The popularity of the vampire tale of the nineteenth century also speaks to a sense of future-oriented anxiety over social change. According to Lois Cucullu, the vampire tale reveals “uneasiness over blood and kinship ties, social mores and class standings, and . . . gender and sexual norms” and does so through its disruption of waking and sleep (305). For example, in Bram Stoker’s Dracula, we see numerous examples of women, who during their bouts of vampire-induced insomnia, become overtly sexual, insist on solitude, and wander alone in the evenings to pursue sexual encounters. Joseph Sheridan Le Fanu’s Carmilla provides another example of this motif. The action of the novel begins with the unexpected arrival of three strange women at the narrator, Laura’s, father’s home. The women who arrive behave shockingly, the elder one approaching Laura’s father as an equal rather than her superior, making demands of him immediately. Laura describes the elder one as “so distinguished, and even imposing, and in her manner so engaging, as to impress one . . . with a conviction that she was a person of consequence” (412). These women are travelling independently (the only males are servants), and in a surprisingly un-motherly manner of behavior, the older woman requests that Laura and her father provide a temporary home for her alleged daughter Carmilla, so that she can attend to
her “journey of life and death” (411). After bestowing upon Carmilla a “glance which [Laura] fancied was not so affectionate” (412), the elder lady drives away, leaving Carmilla behind. The elder lady’s rude and abrupt manner, her commanding presence, and her willingness to abandon her sick “daughter” to strangers point to her unfeminine nature; whereas, Laura wants only to take on the feminine role of caretaker for the supposedly ill girl. Carmilla’s “illness,” as it turns out, is a show of false helplessness meant to make her hosts vulnerable to her machinations. A governess notes that there was a third woman in the carriage as well, one who is “a hideous black woman, with a sort of coloured turban on her head . . . with gleaming eyes and large white eyeballs, and her teeth set as if in fury” (414), which expresses anxiety both over female independence and the colonial other. The arrival of Carmilla, the vampire, is associated with two decidedly unfeminine women.

Carmilla effaces gender and sexual norms, openly pursuing Laura sexually, even violating Laura’s bed, which simultaneously attracts and repulses Laura. According to Cucullu, “The [vampire] novels broadly hinted that no young woman is safe, even in her bedroom, a version of ‘you snooze, you lose’ or, worse, become loose” (306). We see this “looseness” with Laura who describes her “lassitude and melancholy” as “almost luxurious” (437). Carmilla symbolizes the destructive consequences of females disregarding “natural” (sexually reserved) female behavior, but notably, she destroys other women rather than men. Her presence indicates an anxiety over the danger of the sexually overt and independent female and her detrimental effects on other women. In a sense, she is even more dangerous than a
male vampire like Dracula because she can both play the part of the helpless woman and use that role to fool others into admitting her into their homes and confidence.

In short, insomnia was not absent from texts before World War I, but it was treated differently after the war because of its connotations with anxiety over the future (with thoughts of the past working in service of predicting or explaining the future), as opposed to a backwards movement to the past, which is often regarded with shame and regret; in other words, where pre-war texts use insomnia to analyze the past’s impact on the present and display anxiety over the future, post-war texts illustrate the past as a source of shame and dwell in, rather than reflect upon, the past. Post-war insomnia may contain a sense of anxiety over the future, but significantly places much more focus on both the past and present. By the second decade of the twentieth century, people witnessed the consequences of modernization. Industrialization, conflicts over territory, and changes in the nature of the domestic sphere and its related values had already taken hold, and the Western world witnessed the consequence: the Great War. There was no longer need to fear what these movements might bring because it had already happened (though I would place more emphasis on the former two than the latter here). The Great War, the culmination of the uglier side of industrialization’s capacity advancement without reflection and its related dehumanization, illustrated the consequences of “progress.” Therefore, as a fear of the future morphed into both a sense of regret over the past and the need to analyze it to understand why circumstances turned out as they did, the nature of the way in which insomnia is depicted in literary texts changed as well. As Carl Jung notes, after having a dream in 1926 of being shelled during the war, “The happenings
in the dream suggested that the war, which in the outer world had taken place some years before, was not over yet, but was continuing to be fought within the psyche” (qtd. in Fussell 113). This stronghold of the war upon the psyche is reflected in the ways in which texts describe scenes of insomnia, whether or not the texts are overtly about literal war.

Examining the works of Wells, a writer who produced works spanning from the Victorian era to the period following World War I, provides an interesting example of the shift of the focus of insomnia even in the works of the same author. In his text *The Invisible Man*, published in 1897, Wells explores the dangers of scientific overreach when not coupled with moral considerations, as he tells the story of a man who, through the use of scientific innovation (making himself invisible), abuses his powers and becomes a force of greed and destruction to all he encounters. This tale is one of anxiety over the future and the negative consequences of scientific progress, and these concerns are reflected, at times, in the thoughts of characters during periods of insomnia. For instance, Wells describes the thoughts of Dr. Kemp, a scientist, as he stays up late at night working in his study. Taking a break from his work, Kemp allows his mind to wander. Wells relates these thoughts during his period of restlessness, or productive insomnia “during which his mind had travelled into a remote speculation of social conditions of the future, and lost itself at last over the time dimension” (73). In this passage, Kemp’s late night thoughts focus not on the past or present, but on the future as a source of anxiety.

Yet, in his work written during World War I, Wells offers a different view of insomniac thought. In his 1917 text, *The Soul of a Bishop*, the main character’s
insomnia is not focused on the future, as it is for Kemp in *The Invisible Man*, but rather on the past and present. Whereas the previous text describes the dangers of scientific progress without moral progress, *The Soul of a Bishop* discusses the inability of existing moral and social institutions, specifically the Anglican Church, to combat the moral decay progress engenders; older ways of being are inadequate to handle present circumstances and have, in fact, generated these present conditions. Rather than being a text of anxiety over the future, it is a lament over problems of the present. In a chapter aptly entitled “Insomnia,” Wells describes some of the causes for the bishop, Edward Scrope’s, insomnia. Immediately, Scrope’s insomnia is not focused what will be, but rather on present circumstances:

It was as if he had fallen suddenly out of a spiritual balloon into a world of bleak realism. He found himself asking unprecedented and devastating questions, questions that implied the most fundamental shiftings of opinion. Why was the church such a failure? Why had it no grip upon either masters or men amidst this vigorous life of modern industrialism, and why had it no grip upon the questioning young? . . . This was not as things should be. He struggled to recover a proper attitude. But he remained enormously dissatisfied. . . (36-37)

In this passage, Scrope is thinking obliquely of World War I, but his thoughts are centered on the current state of spiritual and moral crisis, which he links to industrialization and religion as a force of disunity. He does not fear coming change, as Kemp does in the aforementioned passage, but rather knows that change has already occurred but cannot be handled by former methods, and his insomniac thoughts reflect this revelation.

A bit further on in the same chapter, Scrope links his insomnia more explicitly to the war: “He rolled in [the bath tub] in spite of ill-health and insomnia, and all the while he was tormented by the enormous background of the world war, by his
ineffective realization of vast national needs, by his passionate desire, for himself and his church, not to be ineffective” (54). Just prior to this passage, the bishop recalls another instance of insomnia in which he was awakened in the night by a “shameful memory” of a stolen cigarette (54). Again, we see insomnia focused not on fear of the future but on past regret and present struggle. As in the previous passage, Scrope is not anxious over what may come, as Kemp is, but rather, current affairs and his ability to cope with them. The reference to past insomnia and shame is significant in that it implies a chain of causality: past behaviors lead to present circumstances, so the past must be regarded shamefully. He is anxious over what is, and what is takes precedence in his insomnia over what will be.

Such a way of describing insomnia is not exclusive to Wells. In Jean Rhys’s *Good Morning, Midnight* (1939) written more than two decades after Wells wrote *The Soul of a Bishop*, we see a similar pattern. Central character Sasha Jensen narrates her insomnia: “Last night was a catastrophe” (9). She explains how “last night” keeps her awake: “That [humiliating experience] was last night. I lie awake, thinking about it” (11). She describes both her memory of her humiliation and her inability to sleep, “rolling from side to side” while listening to “the clock ticking on the ledge” (12). Sasha’s insomnia is not based, as is Pip’s, Jane’s, or Lily’s, in a fear of the future, but rather her behavior in the past, which she remembers shamefully. Even though Sasha’s memories are not directly linked to the war, we can see in these examples a shift in the content of the insomniac’s thoughts—from future anxiety to contemplation of memories and their subsequent impact on the present moment.
Similarly, in an American text such as John Steinbeck’s *The Grapes of Wrath* (1939), insomnia is also oriented in present anxiety rather than fear of the future. For instance, the preacher, Jim Casy, discusses the causes of his anxiety in terms of his inability to effectively deal with the moral decay of his society (much like Scrope in Wells’ novel): “[The ability to save souls] worried me till I couldn’t get no sleep. Here I’d go preachin’ and I’d say, ‘By God, this time I ain’t gonna do it.’ And right while I said it, I knowed I was” (23). Like Scrope, Casy eventually turns his back on organized religion, which he feels is ultimately ineffective in meeting the demands of modern morality. Instead, also like Scrope, he turns towards his own individualized sense of morality resulting from his sense of the failure of organized religion.

**Insomnia and Modernism**

In part, because of this shift in the presentation of insomnia, I am situating my discussion of insomnia and the beginnings of Modernism alongside the start of World WWI. While I would not disagree that novels written prior to WWI have modernist stylistic tendencies (one might read Laurence Stern’s *Tristram Shandy* as similar in significant stylistic ways to James Joyce’s *Ulysses*, see examples of stream of consciousness writing in Leo Tolstoy’s *Anna Karenina*, and view the metafictional structure at work in Wharton’s novella *Ethan Frome*), Modernism needed the Great War to fully come into being precisely because it was the symbolically calamitous culmination of the advances of the nineteenth century. Accordingly, numerous changes in several areas of discourse relevant to insomnia took place directly because of the war. These discursive shifts include changes in the nature of medicine and
psychiatry, changes in the conception of time, and changes in the ways in which language and art functioned, all results of the war.

Beginning my discussion of insomnia and the insomniac after WWI is also important given the war’s structural affinity to insomnia. The Great War and the phenomenology of insomnia are similar for many reasons. The war was one of attrition, or in other words, exhaustion, and exhaustion was felt by many during the war, one soldier even stating that he “felt [he] would barter [his] soul for a few hours of uninterrupted slumber” (qtd. in Eksteins 151). The war was won by the side that could cope with its exhaustion the most effectively. Additionally, WWI was largely fought nocturnally. It turned the soldiers and war workers into insomniacs, requiring them to remain awake long into the night to reinforce the trenches, launch attacks, and conduct other business of war that the visibility of daylight rendered too dangerous. Modris Eksteins explains that as a result of the nocturnal nature of trench life, “The normal bourgeois approach to time and to the clock was reversed” (150). Consequently, the war altered perceptions of time and created a reversal of night and day. Further, the length of the war and the sense of its endlessness mimics the insomniac waiting for sleep. Logically, one knew the war must end, much as the insomniac knows sleep will eventually come. The problem was that no one could predict either the end of the war or the end of insomnia.

Finally, the war had an important impact on perceptions and treatments of mental health problems. In an article entitled “Shell Shock and Its Lessons,” published in the British Medical Journal in 1917, author G. Elliot Smith acknowledges the ignorance of mental health authorities on their ability to treat
mental disorders: “There is hardly any department of medicine which has been so neglected in this country, not only from the clinical and therapeutic but also from the research standpoint, as that of psychopathy as apart from definite insanity” (47). Consequently, research increased. Because of the traumatic nature of the war experience, fostered by both the often stagnant conditions of the war, as well as the devastating nature of injuries made possible by new technologies such as poison gas, air strikes, more accurate and deadly munitions, and repeated shellings and bombings, even soldiers who remained physically uninjured often suffered psychologically and emotionally. Eksteins writes that “one of the great fears of soldiers was that they might break under stress, that they might lose self control, that their legs or nerve might fail them in an emergency” (180). Because, prior to the war, mental illness was viewed as more of a women’s problem, related to constitutional and emotional weakness, the mental breakdown of soldiers and others involved conflicted with the traditional conceptions of masculine stoicism. As Elaine Showalter argues, “shell shock was related to to social expectations of the masculine role in war. The Great War was a crisis of masculinity and a trail of the Victorian masculine ideal” (Female 171). Yet, after the war, “The image of idle middle-class women as the chief clientele for nervous disorders had been substantially modified” (Showalter, Female 195). The mental breakdown of many otherwise healthy individuals lead to changes in the perceptions of psychological disorders as feminine problems or indicators of weakness, which will be discussed in the chapters to come.

In addition to the changes I have just described, WWI had an influence on the ways in which individuals understood their relationship to time beyond differentiating
day and night. As Fussell explains, “The image of strict division clearly dominates the Great War conception of Time Before and Time After, especially when the mind dwells on the contrast between the prewar idyll and the wartime nastiness” (80).

Thus, not only does the war act as a culmination of scientific, political, and technological innovation, but also as a fixed dividing line between past and present society and mode of life. Not only is history divided into two distinct periods, one’s actual experience of time itself changed. Bryony Randall explains:

The First World War radically disrupted the ways in which human temporality was or could be conceived. . . . Not only was the war an event without precedent, in brutality and scale, radically challenging attempts to create an historical narrative that would be able to incorporate it, but, as [Paul] Fussell emphasises, there was a widespread belief in circulation at the time that ‘the war would literally never end and would become the permanent condition of mankind.’ Fussell describes how the experience of fighting at the front, characterised by often apparently meaningless routine, the carrying out of illogical or downright contradictory orders, and the absolute ignorance of what was going on even a few hundred yards down the line, let alone miles away, conspired to deprive temporality of its familiar characteristics of causality, logical succession and change. (3-4)

One could express insomnia in largely the same terms Bryony Randall uses to describe the war’s effect on notions of temporality. Like war, insomnia appears to be a “permanent condition” at least as it is being experienced. Often, for the insomniac, fear of insomnia itself is enough to elicit insomnia, perpetuating the sense of the infinite. Because the insomniac sometimes does not know when he or she sleeps or even that he or she may have been asleep in the midst of what seems to be a state of wakefulness, insomnia does indeed incorporate a sense of endlessness. Additionally, because medical texts emphasize the importance of establishing proper bedtime routines and habits, insomnia reveals these routines to be ineffectual, illustrating the
“apparently meaningless routine, the carrying out of illogical or downright contradictory orders” in this case given by doctors or well-meaning friends or relatives in futile attempts to help the insomniac. Insomnia also often includes “the absolute ignorance of what was going on even a few hundred yards down the line” as the insomniac is typically isolated from others and ignorant of what is happening beyond his or her (non)sleep space. Finally, insomnia can appear to be “conspired to deprive temporality of its familiar characteristics of causality, logical succession and change” as it robs the individual of participation in “normal” diurnal cycles of sleeping and waking. Preparing for bed should logically lead to sleep, but for the insomniac, who is unable to make the change from the waking state to the sleeping one, such a notion of succession and causality unravels. Thus, as war-time mentality and memories of war experience took hold of the population, the literature produced evidences these changing notions of time through the frequent incorporation of insomnia into literary texts.

The binary division of time into “before” and “after” reflects a greater change in the language habits of individuals, as Fussell notes:

The physical confrontation between ‘us’ and ‘them’ is an obvious figure of gross dichotomy. But less predictably the mode of gross dichotomy came to dominate perception and expression elsewhere, encouraging finally what we can call the modern versus habit: one thing opposed to another, not with some Hegelian hope of synthesis involving a dissolution of both extremes (that would suggest ‘a negotiated peace,’ which is an anathema), but with a sense that one of the poles embodies so wicked a deficiency or flaw or perversion that its total submission is called for . . . one of the legacies of the war is just this habit of simple distinction, simplification, and opposition. (79)

One can relate this dichotomous language with a binary distinction between sleeping and waking. While it is not always the case that either can necessarily be presented
as “a deficiency or flaw or perversion” by itself, we do get repeated images of either sleep as valued over waking, or waking over sleep. Similarly, sometimes sleep is presented as an enemy, as in the case of Ernest Hemingway’s short story “Now I Lay Me” in which the narrator, an injured and traumatized WWI soldier, does everything in his power to stay awake at night because he fears the consequences of sleeping.

However, insomnia is a liminal state, between sleeping and waking. Though many tended to resort to binary language, insomnia presents another option, indicating the failure of binary categorization. Understanding the space between sleeping and waking as a sort of nether-region of consciousness has origins before the war. The nineteenth century text often focused on altered states of consciousness in which one did not know whether one was awake, asleep, dreaming, hallucinating, hypnotized, mesmerized, or in some other way experiencing altered consciousness. Consciousness itself was a variable and unstable state. Jenny Bourne Taylor argues that during the nineteenth century, psychology as a discipline developed rapidly:

The emergence of psychiatric medicine, or ‘mental pathology,’ as a newly respectable branch of the medical profession with the development of the county asylum system and the state care of the insane, contributed to the ways in which discussions of the working of consciousness, the unconscious, and memory formed part of a much wider debate on the nature of social identity. (142)

Importantly, the nineteenth century gave rise to a sense of connection between identity and forms of consciousness, contributing to the development of the identity category of the insomniac at the start of the twentieth century, indicative of this push towards clear classification through identity categories. While in the modernist text, we see a great reduction in the use of states like somnambulism, hypnosis, hypnogogia, and altered states of consciousness apart from the occasional bout of
drunkenness, we see a lot more insomnia, which, by its very nature resists binary classification. Interestingly, more recent scientific studies, which I will discuss in detail in the next chapter, postulate that frequently the insomniac sleeps without awareness of sleep, so the sleeping/waking binary becomes further muddled. Perhaps one of the reasons insomnia becomes such a focus of discussion within the modernist text is a general sense of discomfort with the tendency towards binary classification and the simplification of the individual into fixed, readily-definable identity categories. Perhaps, these texts react to the tension between the two dichotomous states of sleeping and waking, revealing the problems with such a dichotomy.

Language was further altered in tone, particularly for the British as Fussell asserts. He describes “the style of British Phlegm”: “The trick here is to affect to be entirely unflappable; one speaks as if the war were entirely normal and matter-of-fact” (181). This practical use of language to describe unimaginable horrors was bureaucratized by the Field Service Post Card, in which a soldier could send a letter home by simply erasing inapplicable phrases and leaving relevant (though often dishonest) ones present on the form. For example, one might cross out “I have been admitted into hospital” if this were not the case, but leave “I am quite well” or “I am being sent down to base” as applicable (Fussell 184-85). Such a form, (the first form ever created for widespread use, according to Fussel (185)) denied soldiers the ability to include any sense of emotion or personal experience. Unsurprisingly, those with literary inclinations likely balked at the reduction of experience to a worksheet.

Even less surprisingly given this simplification and condensation of language, a subsequent growing sense of the failure of language as a means of expression
begins to take root in period. Another change in language Fussell describes to be a consequence of the war is a sense of the inadequacy of language. Fussell writes:

Logically, one supposes, there’s no reason why a language devised by man should be inadequate to describe any of man’s works. The difficulty was in admitting that the war had been made by men and was being continued *ad infinitum* by them. . . . [T]he presumed inadequacy of language itself to convey the facts about trench warfare is one of the motifs of all who wrote about the war. (170)

This growing discomfort with the ability of language to convey wartime experience might also contribute to the prevalence of insomnia in the modernist text. Because sleeping and waking were seen medically and scientifically in a black and white manner, as polar opposites, and also because people perceive this black and white use of language to be ultimately inadequate in its capacity to describe the war, literary texts often seek to explore a state that is not so black and white. During this gray space of insomnia, the individual can process experience and express the collapse of these simplistic, dichotomous world-views.

In addition to changes in language, the war essentially destabilized the world. As Eksteins explains, “As the war’s meaning began to be enveloped in a fog of existential questioning, the integrity of the ‘real’ world, the visible and ordered world, was undermined. . . . And as the external world collapsed in ruins, the only redoubt of integrity became the individual personality” (211). Thus, in the modernist literary work, we see both the collapse of the ordered, rational world (Joyce’s Nighttown section of *Ulysses* is an excellent example here given its hallucinogenic qualities), as well as an intensified focus on individual psychology. Even in the work of Wells, we can see this shift in the difference between his aforementioned texts, *The Invisible Man* and *The Soul of a Bishop*. Whereas *The Invisible Man* is a story largely told
from an omniscient perspective, presenting the thoughts of many characters with no more specific focus on the psychological workings of one character over another and often offering only fleeting insights into each character, *The Soul of a Bishop* deals extensively with the psychological conflicts of one particular individual.

Unsurprisingly, given all I have argued thus far, insomnia is often the medium through which the protagonist of the latter text’s conflicts are exposed and discussed.

Ultimately, the war itself became regarded as “a form of art” (Eksteins 210). This artistic expression of the war, as Eksteins explains, is due to the fact that the horrific nature of war experience “had . . . little interpretive potential except in very personal terms” (214). Eksteins continues:

> [War writers] connected the sights and sounds of war with art. Art became, in fact, the only available correlative of war; naturally not an art following previous rules, but an art in which the rules of composition were abandoned, in which provocation became the goal, and in which art became an event, an experience. As the war lost external meaning, it became above all an experience. (214)

War, in other words, is not re-presentable through traditional means of expression, and language, by itself, often failed. Thus, after the war, literature, even literature not about war specifically, became more experiential. Texts like Joyce’s *Ulysses*, even though not about war directly, are clearly motivated by this new approach to art. Neither presents a story in the traditional sense; events happen, but the actual experience of reading the text takes precedence over the plot of the text. When combined with the aforementioned changes in the nature of understanding of cause and effect and time, as well as changes in language, we can see the importance of the war in shaping the modernist text.
Conclusions

By the time the war did finally end on 11 November 1918, these associations between war and modernity had become so ingrained in the lives of Americans and British, the impossibility of a return to pre-war ways of life became apparent. Such changes were reflected culturally in new styles of art, including literature. As Fussell asserts, “Very often, the new reality [of life after World War I] had no resemblance whatever to the familiar, and the absence of a plausible style placed some writers in what they thought was an impossible position. . . . [This change in language and literary style] was a matter of leaving, finally, the nineteenth century behind” (174). Literature changed accordingly, and literary uses and depictions of insomnia followed suit. Much like the modernist text, insomnia is not a story, but an experience. During bouts of insomnia, typically, nothing happens. As Blanchot explains, “insomnia is . . . percussive stillness” (49). Insomnia may fit into a plot, but by itself has no plot. It marks the passage of time, but is itself without movement. Consequently, insomnia becomes a very important literary vehicle of the modernist text because it fits so well with changes that took place in literature after the war. It allows for intense focus on individual psychology, it disrupts traditional notions of cause and effect (I am tired and want to sleep, and I am in bed awaiting sleep, but I cannot sleep), and it reflects the same sense of time (infinite waiting with no end in sight) as the war experience.

In order to explore insomnia in the modernist text, I have divided this dissertation into five further chapters. The second chapter provides an overview of the discourse of insomnia from the nineteenth century until modern times. As I argued earlier, the insomniac is a figured produced by discourse, thus his or her
disorder is always tied into contemporaneous values, beliefs, morals, and ethics. The main purpose of this section is to situate the creation of the insomniac historically, as well as illustrate the ways in which the Modernist period influenced our understanding of insomnia and the insomniac today. The next three chapters are devoted to insomniacs in different social identity categories, or, more specifically, the way the category of the “insomniac” intersects with other identity categories.

Chapter three examines the insomniac as a product of the war, as well as the relationship between the phenomenology of insomnia and the phenomenology of the war experience. Chapter four looks at insomnia as related to the gendered body, because, as I will argue, insomnia in bodies of different genders has different discursive representations and implications. The fifth chapter discusses insomnia as it relates to social class, further emphasizing the relationship between social identity categories and the causes, treatments, and perceptions of disordered sleep. Insomnia is regarded both a consequence and disorder of privilege, illustrating again its paradoxical nature. My final chapter breaks from examining various categories of identity in order to illustrate the ways in which insomnia shapes perception and thought, and therefore, literary productions of authors. If experience, but more importantly perception of experience, which is always filtered through language and discourse structures reality, then insomnia, as experience, has the ability to influence one’s perception of the world, and, therefore, one’s interpretation of it as expressed in the literary text. The final chapter explains the ways in which the experience of insomnia translates to the structure of the text.
Ultimately, literature deals with conflict. The four basic literary conflicts involve a person struggling against the self, another person, nature, or society. And, what is insomnia if not conflict, whether the conflict lies in the struggle to sleep or the struggle to keep oneself awake despite exhaustion? But, what makes insomnia so interesting is that it, sometimes simultaneously, envelopes each of these types of conflict. Interpersonal relationships may certainly cause insomnia, as may internal conflict. Similarly, one’s difficulties with social position or expectations are often reflected in insomnia, as is one’s battle with his or her own physiology, nature, or the external, physical world. Conflict, when combined with the changes in art, literature, psychology, and medicine brought about by WWI, lead to a type of literature in which insomnia becomes particularly significant and relevant as a means of expression. The treatment of insomnia in literature presents both a standard discourse in which sleep-time is essential to the working day, or, in other words, productivity, and may also be equated with immoral behavior or contradicting “natural” social roles, yet, the counter-discourse, as represented in literary texts, presents insomnia as essential to a different type of self care, one which comes through exploring one’s internal and external conflicts. Insomnia, as a device, provides the time and space for such exploration, and as an experience, alters perceptions of both the day time and night time worlds.
SNOOZERS AND LOSERS: A GENEAOLOGY OF SLEEP STUDIES

“Sleeplessness is a human tragedy—great or small according to its severity,” begins the “Sleeplessness” section of Dr. W. Johnson Smyth’s 1923 “Address on Sleep and Sleeplessness” (226). Smyth’s statement, made nearly a century ago, accurately represents the medical field’s perception of insomnia as antagonistic, a condition hampering human life, and necessary to prevent through intervention. A cursory internet search done today reflects Smyth’s sentiments; the phrase “insomnia treatments” results in 32.7 million hits on Google. The pursuit of sound sleep also makes for profitable business. According to David Randall, in 2010 a full 25% of adults in the United States possessed prescription sleeping pills, and advertising for these pills accounted for more than $1 billion from 2005-2006 (237).

These numbers are not unexpected given the prevalence of insomnia today: “As the NSF [National Sleep Foundation] documented in its 2002 Sleep in America poll, 58 percent of Americans identify from one to four of the symptoms of insomnia as occurring in a given week, and 35 percent of respondents claim insomnia symptoms running for an entire year” (Wolf-Meyer 161). More recently, the 2014 Sleep Health Index created by the National Sleep Foundation reports that “35% of Americans report their sleep quality as ‘poor’ or ‘only fair’” (NSF). Statistics in the United Kingdom are similar:

In a recent [2007] UK study by Morphy and colleagues, 37% of respondents reported insomnia at baseline; a year later 69% of these
still had problems sleeping, while 15% of those without insomnia at baseline had developed it. Insomnia is also a persistent condition. In a recent [2009] longitudinal study of people with insomnia at baseline, 74% still reported insomnia after a year, and 46% still reported insomnia after 3 years. (Calem et al.)

Given that more than a third of American and British adults regularly have trouble sleeping and more than half have intermittent trouble sleeping, our current interest in sleep and insomnia and the amount of money and resources the sleep industry generates are unsurprising.

Despite the current statistics, the interest in insomnia and its remedies is not a recent phenomenon, nor is relatively widespread insomnia exclusive to contemporary times. Sleep and insomnia have long been literary, philosophical, and poetic tropes, but the emergence of modern medical sleep studies in the USA and UK came about primarily in the second half of the nineteenth century, coinciding with the second Industrial Revolution in Europe and America. Cultural studies sleep researcher Matthew Wolf-Meyer cites Robert MacNish’s 1824 text, *The Philosophy of Sleep*, as the “first modern monograph on sleep” (27), and further notes that “by the 1880s a robust body of literature [on sleep] existed” (52). This new scientific and medical interest in sleep studies in part reflects industrial developments of the nineteenth century rooted in the “principle of unlimited productivity that made fatigue both inevitable and inadmissible” (Summers-Bremner 100), as well as the emergence of the fields of psychology and psychiatry, as described in the first chapter. Increased interest in the production and use of energy, when combined with the growth of both manufacturing industries and the widespread use of publically produced gas and electric lighting, arose alongside inquiries into the maintenance of proper sleep habits,
also known as “sleep hygiene,” the goal of which was the prevention of fatigue and the maximization of productivity.

Around this period in the mid-nineteenth century fatigue, a primary consequence of insomnia, became a social and medical “obsession” (Rabinbach 20). More importantly, however, scientific and medical communities viewed fatigue as a “conquerable” state, one that could be regulated and prevented (Rabinbach 21), thereby resulting in the intervention of the medical branch into people’s sleep habits, but also other elements of their daily behavior or even morality with implications regarding sleep. Anson Rabinbach argues that medical literature of the mid-to-late nineteenth century depicts fatigue as a moral and social illness (20), and “considered fatigue as the chief sign of the body’s refusal to bend to the disciplines of modern industrial society” (38). In this sense, the chronically faulty sleeper came to be understood as a sort of social outcast and rebel.

During the latter half of the nineteenth century, medical discourses often complemented the industrial mentality of the maximization of productivity through emphasis on the correlation between sleep habits and contributory citizenship and moral behavior. For example, when giving advice to parents as to how to handle children with troubled sleep behaviors, Henry Munson Lyman writes in his 1885 book *Insomnia; And Other Disorders of Sleep*:

> Wakefulness sometimes occurs merely as the result of a bad habit. This is usually observed among delicate children of a nervous temperament, whose inclinations have never been thwarted. Such patients have been sometimes cured, after the failure of a long and expensive course of treatment with homoeopathic globules, by the adoption of a systematic moral training reinforced by the occasional forcible application of the parental hand to the gluteal region of the child. Of course such a method must not be recommended without
certain knowledge that no lurking disease of the nervous system has escaped detection. Fretfulness and wakefulness are not associated with proper living and good health. (112)

Lyman’s suggestion to cure troubled sleep habits through spanking (which he euphemizes beautifully) implies both the relationship of good sleep to morality, but also of good sleep to appropriate socialization. Lyman implies that the troubled sleeper lacks moral strength and discipline, and he regards such a child as a drain on the family in two significant ways: as spoiled (“inclinations have not been thwarted”) and “expensive” in terms of the cost of treating the child medically. Overall, these descriptions of the poorly sleeping child reflect the child as not actively productive of resources or “earning” them, but as one who unfairly demands and depletes the family’s attention and finances. The insomniac child is an economic drain on the family, just as the insomniac citizen becomes a drain on his or her society. Thus, he illustrates the relationship between “proper” and disciplined sleep habits and financial prosperity. Consequently, Lyman emphasizes moral education as necessary in instilling good sleep habits, enabling the child to not be a drain, but a productive, disciplined individual.

Sleep and Industry

This interest in fatigue and sleep reflects a developing nineteenth century consciousness of the preservation and utilization of energy rooted in the rise of industry and technology. However, society was essentially dichotomous, and the effects of industrialization were inconsistently spread through urban and rural areas: “the nineteenth century and a good part of the twentieth were effectively a patchwork of disjunct spaces and times, some rationalized and shaped by new institutional and
market-based requirements, while in many others premodern patterns and assumptions obdurately survived” (Crary 66). The rise of interest in fatigue correlated with a society in transition between older, pre-modern and newer, industrial ways of being. Here we see a dichotomy between rural lives and the goods they produce still regulated by natural cycles, but others in more modernized areas living according to the idea that “the rationalization of production was predicated on the rationalization of the body” (Rabinbach 243).

This increased interest in studies of fatigue reflects the rationalization of the body required by industry. According to Eluned Summers-Bremner, “The need to accept the limit to reason of the body’s secret knowledge about when it will sleep or, as with democracy, an opacity key to the system’s functioning, can also be mapped onto social concerns about the future of urban labour in America in the 1880s” (120), but this statement certainly applies to British society as well. Here, we can see an anxiety over understanding the workings of “natural” sleep, the body’s secrets about why and when it can sleep, for the benefit of industry. Interestingly, complaints of insomnia increased alongside industrial developments (Summers-Bremner 83). Paradoxically, the more social discourse focused on maintaining and maximizing energy use, the more the public felt that their energy was being depleted and experienced an increased sense of fatigue. This relationship is similar to the insomniac’s relationship with sleep: the more one obsesses over the need to sleep, the more difficult falling asleep becomes.

One of the major figures involved in the regulation of bodily functions to increase the productivity and profitability of labor is Frederick Taylor, developer of
the Taylorist system of industrial management, or “the first truly scientific method of organizing modern industrial work based on efficient procedures” (Rabinbach 239). Taylor presented a view of sleep research different from labor scientists interested in eliminating fatigue. Taylor’s goal was not necessarily to reduce fatigue, as we see with some other practitioners of the labor science, but rather to eliminate wasted movement and energy (Rabinbach 243). When presented in the light of insomnia, views of fatigue management researchers and views of Taylorists can be applied in both convergent and divergent ways. Both see fatigue and insomnia as counter-productive; however, where those who study fatigue management see insomnia as a cause of decreased energy, Taylorists view it as wasted time. Either way, the need to study and control the sleep of laborers, and by extension, all citizens, essentially makes the work-day (regardless of the type of labor) unending. Now, in addition to time spent working being a marker of productivity, time spent at home, sleeping or not sleeping, also becomes a factor subject to discipline. The industrial anxiety over wasted time, or in other words, wasted productivity and profits, resulted in a medical discourse of sleep and habit regulation as associated with productivity, but also put the work-day on a continuum, which extended through the night. This view persisted into twentieth century devaluations of sleep, as those of Thomas Edison and Charles Lindbergh discussed in the first chapter.

This view of the individual as twenty-four hour machine (whether working or not) is apparent in the language of the medical discipline. For example, in the 1869 book *Sleep and Its Derangements*, John Hammond writes, “The more active the mind, the greater necessity for sleep, just as with a steamer, the greater number of
revolutions the engine makes, the more imperative is the demand for fuel” (50). In another example of mechanistic language, Hammond makes the following comparison: “To use the simile of the steam-engine again, the fires are lowered and the operatives go to work to repair damages and put the machine in order for the next day’s work” (43). Here Hammond clearly compares the individual to a machine, reflecting the relationship between the necessity of sleep and industrial productivity, which Wolf-Meyer explains as “an appeal to efficiency . . . and the continued ability of individuals to labor” (60). In Hammond’s view, the human as machine is either working or “repairing” itself for work; thus, it is always in some state of work.

Hammond provides a clear example of the interrelationship of the medical discipline to industry. A. W. MacFarlane provides another example: “the need for sleep is well explained by the fatigue of daily toil, in which waste products are manufactured quickly and energy is expended . . . a time of rest is required for the removal of the one and the recuperation of the other” (25). Though MacFarlane does not overtly refer to the body as a machine, his language implies this correlation. Using terms like “manufactured” and “products,” MacFarlane presents a comparison of the body to a factory, and like Hammond, views the time of sleep as a period of mechanical repair. MacFarlane and Hammond utilize an economic model of the body, incorporating sleep as a necessary part of the manufacturing process. Marxist writer Paul Lafargue is heavily critical of this mechanistic view of the worker, arguing that for the capitalist, “it is ideal to reduce the producer to the smallest number of needs, to suppress his joys and his passions and to condemn him to play the part of a machine turning out work without respite and without thanks” (21). Lafargue notes the 24-
hour model of individual as worker and finds fault with this conception of man as now presented both by industrialists and the medical field.

Night Lights

Another industrial-medical correlation in sleep studies comes with the increased study of the relationship between the newly developing use of electricity and sleep or fatigue. The first central electricity station was built in New York City in 1883, facilitating the introduction of electric lighting in people’s homes and its widespread public use (Schivelbusch 66). Electric lighting, safer and cleaner than gas, was enthusiastically embraced by the public (Schivelbusch 70-71). The use of electric lighting opened up new economic possibilities, allowing businesses to stay open later and increasing the safety of travelling the streets at night. Jonathan Crary argues, “The illumination of nighttime was a symbolic demonstration of what apologists for capitalism had promised throughout the nineteenth century: it would be the twin guarantee of security and increased possibilities for prosperity, supposedly improving the fabric of social existence for everyone” (16-17).

However, the increased use of electricity had somewhat paradoxical implications, many of which are detrimental to sleep. Wolfgang Schivelbusch notes that when gas is in use, when going to sleep, “people preferred to sever all connection with such a dangerous element and restore the household’s original autonomy for a few hours” (38), but electricity renders lighting not “individualistic,” but rather makes one part of a “collective,” unable to be cut off in order to temporarily sever household ties to the rest of the world (76). Schivelbusch claims, “Just as the public sphere gained access to the home with daylight, so big industry forced its way in with the
light of the gas flame and electric bulb” (186). Thus, much as industrial and fatigue management systems extend the workday into the evening through their interest in sleep, electric lighting ensured that the household always remained “open,” dependent upon, and accessible to the influence and power of industry.

**Night Work**

One additional sleep-negating implication of the widespread use of industrial lighting is the ability to turn night into day. Smyth notes that “Most people sleep during the night. The silence of the night and other circumstances co-operate to bring this about” (226). However, as early as 1845, nearly forty years before the widespread use of electric lighting, critics of industry began to notice the implications of disrupting this typical pattern and equate the disruption of sleep for the purpose of labor with capitalist greed. Frederick Engels writes that the aim of capitalists:

> [W]as to make the capital invested in the building and machinery to produce the highest return, by every available means, to make it work as actively as possible. Hence the manufacturers introduced the shameful system of night-work. Some of them employed two sets of operatives, and let one set work the twelve hours of the day, and the other the twelve hours of the night. It is needless to picture the effect upon the frames of young children, and even upon the health of young persons and adults, produced by permanent loss of sleep at night, which cannot be made good by any amount of sleep during the day. Irritation of the whole nervous system, with general lassitude and enfeeblement of the entire frame, were the inevitable results, with the fostering of temptation to drunkenness and unbridled sexual indulgence. One manufacturer testifies that during the two years in which night-work was carried on in his factory, the number of illegitimate children born was doubled, and such general demoralization prevailed that he was obliged to give up night-work. (161)

Engels’ critique places him in a unique position in relation to the medical discipline’s views of the relationship between sleep and productivity. On the one hand, Engels
agrees that the disruption of sleep cycles and irregular sleep habits are problematic in that they both decrease a person’s energy and perpetuate vice. MacFarlane, for example, notes effects of exhaustion in “the poor, who are obliged to continue their work into the night to eke out their means of subsistence” and relates exhaustion to vice for the “searchers after pleasure who convert night into day” (39-40). In this sense, Engels is in accord with the prevalent medical views of his time, such as the ones discussed by MacFarlane above and Lyman earlier. Engels decries the moral and physical consequences of a break from sleep cycles dictated by natural cycles of light and darkness, noting a marked increase in the vice of night-workers.

On the other hand, Engels acknowledges, in a way many doctors do not, the relationship between the presence of industry and disrupted sleep. Of course, the medical discipline did cite “overwork” as a cause for insomnia; however, “overwork” typically referred to mental, rather than physical toil (MacFarlane 64), thus was dissociated from industrial practice. In another example, with regard to the railroad, a major symbol of industrialization, MacFarlane denies any relationship between it and sleep: “Much was written at one time concerning the effects of railway travelling in preventing sleep, but the writer, after careful inquiries, which, as medical adviser to two railway companies, he had extensive opportunities for making, was unable to find any evidence in support of this opinion” (46). Not surprisingly, MacFarlane, acknowledging in this statement that he is paid by railway companies, has a stake in disconnecting railway travel from insomnia, which Engels does not in the case of industry; in fact, Engels is determined to find fault with industrialists. Those who worked for and with industry, as many medical professionals and fatigue researchers
did, did not readily acknowledge the correlation between industrialization and sleep loss, but rather emphasized the role of individual health and habit. Others, like Engels, view industry’s drive towards increased productivity as a source of sleep disruption on a massive scale. One’s view of the relationship between industry and sleep heavily reflected the bias of the individual analyzing this relationship.

It would be inaccurate to argue that workers did not labor at night prior to the Industrial Revolution, and in “nascent enterprises—the mills, forges, and mines of early modern Europe—we can glimpse the profound contributions that nighttime would one day make to industrial productivity” (Ekirch 161). However, industrial night work was the exception rather than the rule. What was not an exception, though, were other forms of labor that commonly took place at night, such as street cleaning (including the removal of excrement and corpses), the work of servants, laundry, and other tasks that did not require bright light for detailed construction. As A. Roger Ekirch argues in At Day’s Close, a study of nighttime and sleep practices in pre-industrial times, a great deal of labor did, in fact, take place at night (156). However, unlike the perpetually running factories Engels describes, as well as the alienation of the worker from products of these factories, night work of pre-industrial times had two distinct characteristics: idiosyncrasy and personal necessity. Ekirch notes the “irregular hours that marked some laborers’ travail”: “Not all times of day or days of the week for these workers were alike in intensity” (157). Further, it was “the pressures of subsistence” which drove workers to night work (Ekirch 158). Night work was done not as an alternative to, but in addition to daytime work. I am not arguing that the laborer in a factory does not work for subsistence, but he or she
might have the same level of subsistence if granted a day shift instead. The pre-
industrial worker’s subsistence, however, relied upon the addition of this night work,
making it not an alternative to daytime work but a supplement.

One major advancement made in the ability to do work on a massive scale at
night is the use of electricity. Unsurprisingly, the case of electricity provides another
example of the medical discipline embracing industry and its products is evident in
discussions of electricity and lighting. Not only does the rise of gas and electrical
lighting facilitate the ability to stay awake later into the night, it also disrupts the
privacy and isolation equated with sleep, though electricity more so than gas, as
discussed earlier. However, despite the changes in sleep allowed through the ability
to light up hours of darkness, the medical discipline, rather than criticizing the
prevalence of nighttime lighting, quickly embraced the use of electricity in treating
fatigue. According to Schivelbusch:

   Electricity was believed to be, and was used as, a means of restoring
   exhausted energies. In a study of the late-nineteenth-century obsession
   with exhaustion, we read that “in chemical and technological warfare
   against fatigue one weapon stands out among the rest: electricity. If
   fatigue was the disorder of energy, electricity held out the promise of
   restitution.” (71)

Many sleep studies after 1880, including MacFarlane’s Insomnia and Its Therapeutics
(1891), Lyman’s Insomnia; And Other Disorders of Sleep (1885), Edward Payson
Hurd’s Sleep, Insomnia, and Hypnotics (1891), and George M. Beard and A. D.
Rockwell’s On the Medical and Surgical Uses of Electricity (1891) offer descriptions
of the uses of electricity in treating insomnia. MacFarlane, for example, asserts its
efficacy: “This remedy, whether in the form of central galvanization or general
faradizations, is often attended by an improvement in the quantity of sleep. . . . The
writer has found it beneficial in about three-fourths of the patients who have used it for insomnia” (294). Here we begin to see a dichotomy between public perceptions of electricity as a means to forestall sleep and the medical and industrial view of electricity as a means to prevent fatigue, similar to the discrepancy between Henry David’s Thoreau’s famous illustration in *Walden* of the railway as disruptive to sleep and MacFarlane’s denials of this relationship.

**Creating the Insomniac**

Given this convergence of various factors, including industry, studies into fatigue and productivity, and widespread public and domestic nighttime lighting, the early twentieth century gives birth to a new medical diagnostic category: the “insomniac,” which I discuss in my first chapter. I will not repeat my discussion of the general implications of this new term here, but rather illustrate ways in which sleep studies incorporated the idea of biographic inquiry as a method of treating insomnia. Regarding the insomniac, in a 1923 article on the treatment of insomnia, British physician Robert Hutchinson explains, “A careful inquiry should be made into his past history and present conditions, his daily routine, the arrangement of his meals, the hours and conditions of his work” (776). Hutchinson’s statement emphasizes that insomnia is now not only a condition to be studied, but rather, the person who suffers from insomnia becomes a character to be studied. The idea of inquiry into character as a means of both diagnosis and treatment as we see with the case of the insomniac was intensified by the outbreak of World War I in 1914. Another product of the rise of industry and mechanization, the use of industrial
warfare precipitated a spike in the amount of studies done into insomnia, as a symptom of nervous disorder and fatigue. Rabinbach writes:

> Apart from the manpower needs served by the psychophysics of aptitude testing and the rehabilitation of the wounded, the psychological effects of combat, especially pathological fatigue and neurasthenia, also emerged as a universal concern. The war brought in its wake a voluminous literature on the psychology of the emotions, in particular the nervous disorders of the combatants. (266)

Much as medicine and industry worked together to use industrially produced electricity as a form of treatment and ensure a rested workforce, so then did medicine and industry work in the rehabilitation of soldiers to return them to productivity both during and after the war: “In short, two systems were ultimately compatible. It was not good intentions or a new intellectual synthesis, but World War—especially the reorganization of national industry for war production—that accomplished the amalgamation of the science of work to the Taylor system” (Rabinbach 258). In other words, the war allowed for a culmination of the goal of sleep studies initiated in the nineteenth century: to enable the medical discipline to ensure a productive labor force, but also a labor force dependent on the very systems that render it productive (electricity and medicine).

Part of the methodology of applying work science to both the military and industry involved inquiries into the nature of the individual as reflected in the creation of the diagnostic category of the insomniac. As Smyth observes, “There are few, if any, human ailments requiring so fine a comprehension of our patient’s individuality, his physique and surroundings, as the condition of insomnia” (227). Part of the understanding of the individual comes with an understanding of his or her habits: “In order to affect this desirable end [to insomnia] an attempt ought to be made by every
middle-aged person who suffers from insomnia in whatever degree to mend matters by some attention to the details of routine habits” (Rankin, “Broken Sleep” 77).

Because sleep is a habit, correcting the habit of disrupted sleep requires discipline; however, discipline also involves outside coercion (as that from a doctor) into daily individual behaviors. As Foucault argues, “Discipline ‘makes’ individuals; it is a specific technique of power that regards individuals as both objects and instruments of its exercise.” He continues, “The exercise of discipline presupposes a mechanism that coerces by means of observation” (Discipline 170). The diagnosis of insomnia, or more significantly, of being an insomniac, opens one’s life up to both discipline and observation of an individual’s past and present circumstances and coercion into “improved” sleep hygiene and habits.

According to Elaine Showalter, the period from 1870 to World War I was “dominated” by Darwinian psychiatry. This particular branch of psychiatry “sternly maintained that hereditary organic taint compounded by vicious habits caused madness” (Female 104). While madness and insomnia are far from synonymous (though the latter is often a symptom of the former), the methodology of this Darwinian branch of medicine has strong resonances with the ways in which insomnia was diagnosed and treated in the time period surrounding the coining of the term insomniac. Showalter writes that Darwinian psychology “brought with it changes in the view of the psychiatrist’s role and of the proper conduct of treatment” (Female 105). Most significantly:

Claiming a new social authority as experts on the laws of heredity and the operations of the mind, Darwinian psychiatrists extended their professional role far beyond the asylum walls. They sought to capture a wide sphere of power in late nineteenth-century society: in the
courtroom, where they made pronouncements on the family and education of youth; in the bedroom, where they defined acceptable sexual behavior; and in the state, where they proposed mental hygiene as the model of social discipline. (Female 105)

This invasion of psychiatry into the “bedroom” and other realms of a patient’s life, as Showalter argues, goes beyond just the diagnosis of madness to the regulation of overall social hygiene, reflecting a medical discipline imbued with a strong sense of social responsibility.

This sense of responsibility only increased with the outbreak of WWI in 1914 and the subsequent cases of war trauma, then commonly referred to as “shell shock.” Many believed that “shell shock was dependent upon a psychoneurotic history, and that it was highly contagious, more frequent among the nervous, weakly, and maladjusted, and among undisciplined units” (Showalter, Female 170). Thus, again, we see a condition that is not interpreted as a product of its immediate circumstances, but rather, one that is regarded as a culmination of circumstance, character, and biography. Significant parallels exist between the diagnosis of insomnia and the treatment of the epidemic of “shell shock” that occurred as a result of the war. On the most basic level, insomnia is one of the most consistent symptoms of shell-shock. Additionally, the diagnosis and treatment of both shell-shock and insomnia involve inquiries into the character of the afflicted, as well as an association between character type and propensity to suffer from either disorder. Finally, the goal of treatment for either was the ultimate return to “normal” productive daily life. In a passage on the relationship between shell shock and insomnia, in the 1918 article “Broken Sleep,” physician Guthrie Rankin writes:
This terrible war has exacted from those who participate in its activities, as well as from those who “watch and wait,” an enormous toll of misery both by day and by night. The man whose nervous system breaks under the strain of the horrors of active conflict finds his clinical counterpart in the mother, wife, or sweetheart at home, whose mental poise has equally, and after a similar manner, yielded to the burden of long-continued anxiety. Both have reached, through different channels, the limit of endurance, and the periodical repose which the nervous system can only obtain during sleep is interrupted, or, it may be, permanently broken. (77)

In this passage, Rankin effeminizes the soldier who suffers from shell shock, comparing him to a housewife. As Showalter argues, “Built on an ideology of absolute and natural difference between women and men, English psychiatry found its categories undermined by the evidence of male war neurosis” (*Female* 168), and this undermining of categories is evident in Rankin’s linkage between soldier and housewife. While he does acknowledge the horror of war as an intrinsic part of the breakdown of one’s sleep, his wording suggests the importance of character. For example, he says “The man whose nervous system breaks,” rather than “The horror of war breaks the man’s nervous system.” His use of the passive voice defers agency from the war experience to the character of the man incapable of resisting its effects.

The Modernist period, roughly concurrent with the start of World War I, provided a dichotomous representation on the function and purpose of sleep studies. On the one hand, the medical discipline continued along its previous trajectory of emphasizing the evils of disrupted sleep, associating insomnia with flaws of temperament or constitution, and conducting inquiries into the character and history of the insomniac. On the other hand, literary authors began to incorporate their own critiques of the medical discipline in their texts, and often did so through illustrating the futility of medical treatments of insomnia and attempts at regulation of sleep. We
see such critiques in the works of modernist authors like Virginia Woolf, Dorothy Richardson, H. G. Wells, Siegfried Sassoon, and Ford Madox Ford. Other authors, including F. Scott Fitzgerald, Franz Kafka, Marcel Proust, and James Joyce include within their texts a different presentation of insomnia from that of doctors, not as a condition diminishing productivity, but a state necessary to artistic and creative production. I will address both approaches in more detail in subsequent chapters.

It is worth mentioning, however, that during this period we also see the rise of the insomniac as a character, which this dissertation discusses in much detail. Kenton Kroker argues that “The 1920s and 1930s saw the evolution of the full-blown insomniac, whose routine struggle for adequate sleep provided psychiatrists and neurologists with a typology, and patients with an identity” (349). As Kroker notes, during this period insomnia was viewed as an “organic condition . . . thoroughly grounded in the personal and medical care of the body,” and this condition also had important resonances with overall mental health (351). Though I argue that WWI itself had a great deal to do with the seemingly endemic nature of this condition, Kroker argues that some contemporaries saw discussion of insomnia in media as being part of the problem as well. For example, he cites the sleep researcher Robert Kingman, who viewed insomnia as a “circular madness” that was so exaggerated within media that people developed a “pathological fear of wakefulness” thereby proliferating the condition of insomnia (351). Interestingly, Kingman largely viewed insomnia as a delusion, and believed that modern individuals required less sleep than their pre-industrial counterparts (Kroker 351). Much as Kingman feels that insomnia is “circular madness,” his argument about the media involves circularity as well: did
media make this condition “popular” through discussion? Or did it discuss this condition because of its popularity?

**Modern Sleep Studies**

Ultimately, the goal, purpose and discourse of sleep studies remain fairly consistent through the Modernist period in the ways I have previously described and will explore in more detail in chapters to come. In fact, some maintain that, with the exception of an increased production of information about the brain, body chemistry, and circadian rhythms, little has changed in the study and practice of sleep over the last century. Jim Horne, author of the 2006 book *Sleepfaring: A Journey through the Science of Sleep*, argues that “our sleeping life has not really changed and, if anything, is better today than for the average worker 100 or so years ago” (205). He cites a passage from an 1894 editorial on sleep published in the *British Medical Journal*, which states, “The hurry and excitement of modern life is held to be responsible for much of the insomnia of which we hear” (qtd. in Horne 184), commenting after the above quotation: “All that needs to be done [to the article] is change the writing style a little to fit the modern idiom and the message is fit for today!” (184). In short, we still see “modern life” as responsible for lost sleep and consider sleep as a major part of overall health practices.

Current studies on sleep have taken two different and widely oppositional directions. On the one hand, modern sleep science continues the work of maintaining a productive and alert workforce, offering lifestyle advice or medications in order to prevent insomnia and ensure quality sleep, and detailing new research producing knowledge of the medical role of sleep in our lives. However, one major difference
between the sleep studies of today and the sleep studies of the nineteenth and early twentieth centuries rests in their relationship between insomnia and morality. While some today still view being awake at odd hours a sign of suspicious behavior, medical studies of sleep do not tend to argue that morally culpable individuals are more likely to suffer from insomnia. On the other hand, and only recently, studies of sleep science itself (as opposed to scientific studies of sleep) have become relatively popular, giving rise to a number of authors critiquing the function and necessity of sleep research. Up until very recently (the twenty first century), critiques of the medical sleep industry were generally limited to literary narratives, many of which will be explored to come. Today, we see some researchers in the social sciences becoming involved in questioning the discourse of sleep and presenting the modern sleep industry (ranging from developers of prescription drugs to manufacturers of mattresses and sleep accessories) as having increasing cultural and discursive significance. Many current sleep research critics depict insomnia as a battleground for individual autonomy and identity. Others, often more philosophically or literarily motivated, study sleep and insomnia from an ontological perspective, and argue that insomnia is a necessary and productive state, not to be eliminated, but to be embraced and explored. All sleep studies researchers, whether from the sciences, social sciences, or humanities are currently continuing the work of interpreting, resisting, and shaping discourses of sleep and insomnia that I argue was begun by modernist literary authors about a century before.

For the purposes of simplification, I will focus on texts produced within the twenty-first century and divide sleep studies today into three main disciplinary
branches: sciences, social sciences, and humanities (there is also a “fine arts” branch of sleep studies that inquires into sleep/insomnia in visual arts, but that is beyond the scope of my research). While often, there is a correlation between researcher and disciplinary conventions, this correlation is not absolute. Just as sleep and insomnia are “interdisciplinary” (biological, psychological, philosophical), so are sleep studies; for example, social science texts sometimes quote literature and personal narratives of insomnia quote scientific texts, so no approach is without interdisciplinary tendencies. In fact, all branches of sleep studies utilize narrative forms. The division these categories itself is culturally produced, but it is useful in creating an overall picture of approaches to sleep studies today. Generally, scientific sleep research focuses on “objectivity”: evidence from studies, medical research, and analysis of brain waves. Social scientific texts utilize more media-based evidence, such as advertisements. Humanities text employ personal testimony and examples from literature, art, and philosophy. That is not to say scientific texts do not mention advertising for sleep medications or humanities texts do not cite studies conducted by physicians. The differences exist in the motivation of the text: scientific texts seek to diagnose, explain, and treat sleep disorders; social science texts examine the cultural impact of sleep discourse; and humanities texts describe the impact of sleep discourse and behavior for the individual. At the same time, disciplinary conventions also shape the content of each text and become relevant to their interpretation and understanding of the way in which they present sleep and insomnia. My goal in this section is not to provide reviews of each individual book, nor is to cover every sleep studies book in print, but rather to get a general sense of the ways in which sleep and insomnia are
currently understood and discussed, especially inasmuch as our discussion of sleep and insomnia today is predicated upon the Modernist period on which I am focusing.

As I stated earlier, the scientific branch of sleep studies extends exactly what the science of sleep studies did in the nineteenth and twentieth century: the understanding and optimization of sleep and the diagnosis, treatment, and prevention of insomnia. Two examples of scientifically-based sleep studies texts include David Randall’s *Dreamland: Adventures in the Strange Science of Sleep* (2012) and Jim Horne’s *Sleepfaring: A Journey through the Science of Sleep* (2006). To be clear, David Randall is not a scientist, but an American reporter and Professor of Journalism writing about recent and past advances in sleep studies, with the goal of making scientific studies palatable for the average adult reader. Horne, on the other hand, is a Professor of Psychophysiology and Director of the Sleep Research Centre at Loughborough University, UK, as well as Editor-in-Chief of the *Journal of Sleep Research*, but, even given his scientific background, he presents his material in *Sleepfaring* in such a way that the lay-person can clearly understand the science.

This very idea of making the “science” of sleep accessible to the masses emphasizes the importance of sleep in our current era and mimics the work of earlier sleep researchers from the late nineteenth and early twentieth century who often published, in addition to monographs on sleep, newspaper editorials meant to educate the average citizen on proper sleep hygiene. In addition to the similarities between the titles of the two aforementioned books, both of which include “the Science of Sleep,” as well as their goal of general accessibility, their formats are largely similar. Both books incorporate a general background on the history of sleep research, discuss
current innovations in the science of sleep, devote separate chapters to issues or ailments that prevent “normal” sleep (significantly, insomnia, but also issues like sleep apnea, somnambulism, and narcolepsy), and offer advice as to how to avoid insomnia. Another interesting feature of both books is that they present sleep science in two separate parts: sleep science of the nineteenth century and sleep science after World War II, skimming over the Modernist period (essentially jumping from the late-nineteenth century to the 1950s), which is, of course, my main area of inquiry.

With regard to insomnia more specifically, both texts echo medical texts of a hundred years ago and present insomnia as a matter of individual causation and responsibility and defer to scientific discovery and methodology for treatment. David Randall writes, “[I]nsomnia is a unique and difficult condition to treat because it is self-inflicted. The cause is often the brain’s refusal to give up its unequaled ability to think about itself, a meta-phenomenon that Harvard professor Daniel M. Wegner has called ‘the ironic process of mental control’” (229-30). Interestingly, David Randall refers to the “self” as cause (“self-inflicted”), but then through his use of synecdoche, the “brain” substitutes for the “self” in his explanation. Within this statement exists a paradoxical relationship between the brain and the self; the “self” is implicated in the functioning of the brain, but at the same time, the brain resists the self’s control. David Randall acknowledges the difficulty in treating insomnia, partially because “science, as a whole, has a fuzzy definition of what constitutes the disorder” (232). Again, he makes a revealing statement, arguing that the self’s inability to control the brain is the cause, yet the resolution rests with more scientific understanding. In essence, he appears to be searching for scientific solutions to seemingly ontological
problems, begging the question as to whether we really want science to be able to
determine the way we “control” our thoughts. To put it a different way, if insomnia
rests in our inability to control the functioning of our brains, are we looking for a cure
that entails scientific understanding and manipulation of thought processes? I cannot
help but envision a Hegelian dialectic that is not between the self and other (self), but
rather the self and scientist.

Horne, like David Randall, argues that we do need medical intervention into
our thoughts to prevent and treat insomnia. The treatments he suggests are mainly
psychological: “For a start, the sufferer must avoid getting angry about the insomnia
and blame it for all their problems—it is probably the other way around” (216). He
continues, “Do not worry about not having enough sleep” (217). He concludes that
the best course of action, assuming there are no underlying physical reasons for the
insomnia (like chronic pain or uncomfortable sleeping conditions), rests with therapy:

There is often anger and frustration over other aspects of [insomniacs’] lives, focused on when trying to sleep. Which is all the more reason for sorting out the personal problems and getting these other issues aired during the day rather than taking them to bed. Here is where good counselling can be so very effective, in highlighting these problems and demonstrating why insomnia is not so much a sleep disorder, but one that largely permeates all of wakefulness. (219-20)

Horne, like sleep researchers a century before him, views the root of insomnia as a
matter to be dealt with through therapeutic inquiry. The insomnia does not need the
treatment; the insomniac does. Given his view of insomnia as something that
“permeates all of wakefulness,” intervention into sleep involves a more holistic
intervention into waking life, inversely mirroring sleep studies of the nineteenth
century in which the requirements of waking life entailed intervention into sleeping
habits. Again, we see the self on a continuum between sleep and waking, where both become unified in their need for intervention and normalization.

Another idea proposed by both David Randall and Horne is the idea that insomniacs often sleep a lot more than they believe they do, adding an additional layer of complexity to the mind-body relationship of the insomniac. Horne writes, “Apart from anxiety [the insomniacs’] problem also lies with a loss of the ability to realise that, during the first hour or so of seemingly endless tossing and turning, for what seems like interminable periods during the night, they are dipping in and out of what can become beneficial sleep” (214). David Randall makes a similar argument:

Patients who have spent a night in a sleep lab, for instance, often complain that it took them more than an hour to fall asleep when a chart of their brain waves shows they were asleep within ten minutes. Problems of self-reporting aren’t limited to judging how long it took to get to sleep. Some patients wake up in labs claiming that they didn’t sleep at all during the night, despite hours of video and brain wave evidence to the contrary.

It is part of the paradox that sleep presents to a conscious mind. We can’t easily judge the time that we are asleep because that time feels like an absence, a break from the demands of thought and awareness. The times that we do remember are those that we wish we couldn’t: staring at the clock in the middle of the night, turning the pillow over desperately hoping that the other side is cooler, kicking the covers off or pulling them up close. Those experiences, even if they last only three minutes, often become exaggerated in our minds and overshadow the hours we spent sleeping peacefully, simply because we remember them. (232-33)

In other words, not only is insomnia all in the insomniac’s head (as cause of insomnia), but it is also all in the insomniac’s head (as experience of insomnia). Again, according to this presentation of the experience of insomnia, the actual insomnia is not the problem; rather the way we think about the insomnia is the real issue at stake. We think we are not sleeping; therefore, even if we do sleep, we
cannot realize that we have, which further exacerbates the sense of sleeplessness and perpetuates its existence (or perceived existence).

Both of the explanations above of the discrepancy between the amount of sleep an insomniac “actually” gets and the amount of sleep he or she perceives raises an interesting question: what is more important, sleep or the feeling of having slept? Both David Randall’s and Horne’s approaches point to a privileging of the scientific over the ontological: getting “beneficial” sleep trumps the benefits of feeling like one has slept. Insomnia becomes a mere chimera, but an extraordinarily powerful one. Yet, the “illusion” of insomnia appears to be what truly motivates the insomniac and perpetuates the ongoing sense of insomnia. The body may have slept according to scientific “evidence” like brain wave patterns, but the mind does not feel this way. The subject then perceives the reality to have been lack of sleep, though, as Horne argues, most sufferers “are not particularly sleepy in the daytime, are ‘bright eyed’ by day, and do not complain of sleepiness—only that they cannot go to sleep” (214). He concludes, “No daytime sleepiness equals no real sleep loss” (214). The area of contention becomes the state between “real” (Horne’s word) and perceived, but also raises another question: if the insomniac is not really tired or suffering other health effects, why is insomnia a complaint at all?

**Sociological Sleep Studies**

The answer to this question comes, at least in part, from a different approach to sleep studies, which examines discursive perceptions of the importance of sleep and the “harm” of insomnia. Taking a different route from the scientific analysis of sleep are the social-science texts such as Jonathan Crary’s 24/7: Late Capitalism and
the Ends of Sleep (2013), Matthew Wolf-Meyer’s The Slumbering Masses: Sleep, Medicine, and Modern American Life (2012), Simon J. Williams’ The Politics of Sleep: Governing (Un)consciousness in the Late Modern Age (2011), and Eluned Summers-Bremner’s Insomnia: A Cultural History (2008). The authors of these texts come from a wide range of academic disciplines: Crary is a Professor of Modern Art and Theory, Wolf-Meyer is an anthropology professor, Williams is a sociology professor, and Summers-Bremner is an English professor. Despite their divergent fields, all approach sleep from a social/cultural perspective if not from the social sciences directly. Rather than explaining the content and conclusions of sleep research, these texts trace the impact of sleep research on Western life both historically and currently, and do so through examining both scientific and cultural texts. They do not offer advice on insomnia cures or analyze sleep with the end of understanding and improving one’s rest, but instead emphasize the ways in which sleep research, rather than sleep itself, contributes to our daily behaviors and interpretations of the world. The first three texts, while they include some historical perspectives generally from the last half of the nineteenth century, are mostly focused on sleep in the late twentieth and early twenty-first century, adopting the general position that the current state of scientific sleep studies, as well as the sleep industry, reflects, supports, and emphasizes a frenetic sense of production and acquisition apparent in modern capitalist life. Summers-Bremner focuses more broadly on the history of sleep studies, beginning in the ancient world, but also concludes with the effects of modernity and capitalism on sleep today; she also includes historical examples from literature within her research. One common feature of all texts is that
they present the way we discuss sleep, but more importantly, the way we actually
sleep, as intrinsically connected with economic and social forces in action today.

One conclusion these sociological texts share is the perspective that capitalism
devalues sleep-time, essentially because it is time spent neither earning nor spending
money. Crary, for example, argues:

> The huge portion of our lives that we spend asleep, freed from a
> morass of simulated needs, subsists as one of the great human affronts
to the voraciousness of contemporary capitalism. Sleep is an
> uncompromising interruption of the theft of time from us by
capitalism. . . . Sleep poses the idea of a human need and interval of
time that cannot be colonized and harnessed to a massive engine of
profitability, and thus remains an incongruous anomaly and site of
> crisis in the global present. (10-11)

As of yet, scientific endeavors have focused on the ability to reduce or eliminate
sleep, rather than the ability to eliminate wakefulness through the “productive” use of
sleep time (in the sense of putting sleeping people to work in their sleep), but his
comments suggest the future possibility of such a movement. Currently, we have
some nascent examples of this trend, as anyone who has ever tried to quit smoking or
learn a foreign language in their sleep could attest. Crary traces sleep’s
“incompatibility with modern notions of productivity and rationality” back to
Enlightenment philosophers like David Hume, Rene Descartes, and John Locke, who
“disparaged sleep for its irrelevance to the operation of the mind and the pursuit of
knowledge” (12). “Sleep,” Crary asserts, “is the only remaining barrier, the only
enduring ‘natural condition’ that capitalism cannot eliminate” (74).

However, just because capitalism has not yet managed to eliminate sleep, that
does not mean it has not tried to do so. For example, David Randall notes that the
American military’s “goal was to develop a way for a soldier to go without sleep for
one hundred hours and still perform common tasks. The military spent millions of dollars testing theories, such as whether it would be possible to put half of the human brain asleep at a time, essentially allowing a person to sleep like a dolphin” (135). All these tests failed, and to date, no medication has been developed that can substitute for sleep. Additionally, psychologist Ray Meddis, writing in the 1970s, hoped to find a way to rewire the brain so as to avoid the “wasted time” associated with sleep (Wortham 2). Meddis viewed sleep as an unnecessary by-product of evolution, no longer essential, but simply a product of habit (Wortham 2). A movement towards reducing or eliminating the need for sleep points to a mechanistic conception of the individual as a 24/7 machine evolving from the nineteenth century portrayals, such as those of MacFarlane and Hammond:

> A 24/7 environment has the semblance of a social world, but it is actually a non-social model of machinic performance and a suspension of living that does not disclose the human cost required to sustain its effectiveness. . . . An illuminated 24/7 world without shadows is the final capitalist mirage of a post-history, of an exorcism of otherness that is the motor of historical change. (Crary 9)

Humans no longer simply resemble machines, as nineteenth century comparisons indicate; rather, according to Crary’s view, with the drive towards sleeplessness (which must be distinguished from insomnia), humans become the machines, fully integrated into a larger network of machines. Part of this de-individuation comes through the devaluation of sleep.

Historically, the discursive view of sleep has changed. Prior to the Industrial Revolution, sleep was regarded as “something to be striven for, a quiet state that needed to be gained” (Summers-Bremner 8). Rather than being regarded as a passive, unproductive state, Summers-Bremner argues that the ancients saw sleep as
“an active part of life whose only distinction from waking activity was that it usually took place in darkness” (8). Like Crary, Summers-Bremner argues that modernity devalues sleep (8). Thus, we see this movement from sleep as an active, desired state to a currently devalued one, with a turning point essentially being the emergence of capitalist economic systems in which increased time spent working is equated with increased profits (Summers-Bremner 50). However, the Industrial Revolution, given its focus on the rationalization of the body to foster efficiency, created a middle ground of sorts between sleep as an active, desirable state and sleep as a waste of time. According to Wolf-Meyer, “Since the industrial revolution, Americans have become invested in a form of social organization that limits varieties of sleep. Moreover, this limiting organization also forces the medicalization of particular normal sleeping patterns, rendering them pathological” (254). Wolf-Meyer’s argument makes sense in the context of the sheer amount of sleep studies that took place in the latter half of the nineteenth century. Sleep was certainly seen as desirable, but only inasmuch as it fit into and prepared one for the workday. Summers-Bremner writes, “Not only does capitalism count on its workers having had a good night’s sleep before they have had it, but it adds the future value of future sleep, required to keep the worker working reliably, into its forward accounting of time” (99). As I argued earlier, in the nineteenth century, so much sleep advice existed because sleep was seen as essential to productivity. Today, as technology changes, science has begun to question whether or not sleep actually is essential or to what extent it can be eliminated.
Though Crary and others argue that capitalism currently devalues time spent asleep, in a way that did not take place a century earlier when time asleep should be maximized rather than eliminated, some researchers describe ways in which capitalism can, in essence, reclaim the value of sleep, not by eliminating it, but by selling it. Profits from lost sleep come largely in the form of sleeping pills, which as I noted earlier, 25% of Americans have been prescribed. This widespread use of pharmaceuticals indicates an ironic (and cynical) attempt at re-establishing “natural” rhythms of sleep and waking. Wolf-Meyer notes that “At the turn of the twenty-first century, American everyday life is fundamentally tied to ideas of the rhythmic, emblematized in the repetitive use of pharmaceuticals, which produce and depend upon everyday notions of time and space” (92). Modern life and technology have so far removed us from “natural” (I use this term skeptically—if a cave person ate some soporific berries, is his or her sleep “natural”?) time and space that their effects can now be recreated medically.

We can see the extent to which pharmaceuticals have become profitable through the sheer number of their sales; Williams illustrates that the global market for sleeping pills, both prescription and over-the-counter, exceeded $4.3 billion in 2005, with predictions of sales exceeding $11 billion by 2012, nearly a three-fold increase (Politics 138). In America alone, according to an NBC News article, a reported 50 to 70 million Americans suffer sleep disorders, and “about 59 million sleeping pills were prescribed in America in 2012” (Aleccia). These numbers exclude other sleep-related products, such as designer mattresses that can cost up to $10,000 (Hayes 77), white noise machines, Continuous Positive Airway Pressure (CPAP) masks for sleep
apnea, fitness trackers that purportedly measure and record sleep time and quality, and even Smartphone applications designed to improve the quality of sleep.

Not only do we see a recent increase in the amount of sleep-inducing drugs on the market, but also in the use of prescription stimulants, such as Provogil, used to promote and extend wakefulness. Originally used to treat narcolepsy and shift-work sleep disorder, as well as (more controversially) sleep apnea, Provogil has recently seen a spike in prescriptions for ordinary drowsiness, and “can now be prescribed at the whim of attending physicians for any number of drowsy conditions” (Wolf-Meyer 146-47). Wolf-Meyer quotes the website of Cephalon, the pharmaceutical company that manufactures Provogil: “People with excessive sleepiness may feel as if they just don’t have the energy to do the things they need to do on a daily basis, such as spending time with their families or performing duties at work” (qtd. in Wolf-Meyer, 147). Analyzing these statements, Wolf-Meyer argues, “One might notice in these symptoms the very conditions of modern life” (147). Interestingly, the “treatment” for modern life is not rest, but rather artificially induced wakefulness.

Seemingly, then, given the fact that capitalism devalues time spent sleeping due to lost productivity in combination with the fact that sleep disorders are highly profitable given the numbers of pharmaceuticals and other sleep-inducing products sold, insomnia is one of capitalism’s greatest allies—the epitome of a “create the problem then sell the solution” driven market. Yet, somewhat ironically, insomnia and capitalism have yet to become friendly bedfellows, and definite tension exists between the conflicting ideas of the push to get “proper” or “enough” sleep and the drive to eliminate the need for sleep and promote the value of spending more time
awake. As Williams argues, “In response to this dominant or sleep-negative agenda, we may also now point to a second growing and altogether more concerned: sleep positive agenda . . . in which sleep is problematised as a matter of concern on the one hand, given the costs and consequences of poor sleep for society, and championed on the other hand” (Politics xiv). So, while we are given every reason not to sleep today, from a multitude of responsibilities and distractions to the ability to conduct business at any hour, we are still told how important and necessary proper sleep is, essentially for the same reasons that existed in the nineteenth century: it is necessary to be healthy and productive. For Williams, “sleep is being or has become increasingly politicised in the late modern age” (Politics xvii). I differ with Williams on this point, as I argue that this politicization of sleep is far from a recent phenomenon, but his point is resonant in its understanding of sleep as a matter of public and political concern, but also one subject to conflicting discourses: sleep is good, healthy and necessary as opposed to sleep is a waste of time and productivity. The difference, for me, between today and the Modernist period is the balance between sleep as waste and sleep as health. While, in the Modernist period, there was certainly a sense that excess sleep was waste, the idea of eliminating sleep altogether was not seen as the option it is today, especially given the social concerns over fatigue. Even those who sought, like Edison, to limit their sleep, were viewed as supermen of sorts, not necessarily someone to be emulated by the majority, but outliers with a unique talent.

An important distinction between insomnia and sleeplessness must be acknowledged, which is another significant different between the nineteenth and twentieth centuries and the twenty-first century. Sleeplessness, as in the sense of the
hypothetical sleepless soldier mentioned earlier, is time spent awake and active, participating in the 24/7 network Crary envisions. In the nineteenth and twentieth centuries, the ability to be sleepless yet rested was sometimes seen as admirable, especially in powerful men like Napoleon and Edison (albeit dangerous for women). But, eliminating sleep altogether was off the table in terms of lifestyle options. Insomnia is time spent awake, but awake in isolation, hence it implies non-compliance, and was and is accordingly problematic. If sleep is politicized and seen in a dual light, so then must be insomnia. Interestingly, though nearly all of the aforementioned authors of cultural sleep studies argue that capitalism, industrialization, and modernization foster insomnia, they also present the view that insomnia is no friend to capitalism, despite the revenue it generates. Crary, for instance, paraphrasing and adapting Emmanuel Levinas’ ideas, argues that insomnia is powerful because it is a form of resistance to the violence of modern society:

Part of the modernized world we inhabit is the ubiquitous visibility of useless violence and the human suffering it causes. This visibility, in all its mixed forms, is a glare that ought to thoroughly disturb any complacency, that ought to preclude the restful unmindfulness of sleep. Insomnia corresponds to the necessity of vigilance, to a refusal to overlook the horror and injustice that pervades the world. It is the disquiet of the effort to avoid inattention to the torment of the other. . . . It is where we face the near impossibility of living humanely. (18-19)

Levinas, in *Time and the Other*, describes insomnia as “Vigilance without end” (48). He argues that insomnia is “a vigilance without refuge in unconsciousness, without the possibility of withdrawing into sleep as into a private domain” (49). If we look at insomnia as a state of waking isolation, where one is not awake in the sense that one is being distracted by the goings-on of the world, but rather can merely contemplate
them, then insomnia becomes a time of questioning, realization, and resistance.

Essentially, insomnia is a state of awake-ness without external stimulation, which can prevent analysis and insight. Insomnia, in Crary’s view, forces the insomniac to reckon with the conditions of his or her existence, and Crary argues that these conditions are quite ugly. We can be distracted from this ugliness by constant stimulation, but without that stimulation, as is the case of the person who lies awake in bed alone at night, we must confront the ugliness instead.

Wolf-Meyer, on the other hand, has a different position as to why insomnia is problematic today. He argues that our concern over insomnia today relates not as much to insomnia as a time for confronting the horrors of the modern world, but rather because of another form of resistance that the insomniac displays: resistance to homogenization. He writes, “The power of medicine lies in its ability to cure, in its ability to make bodies anew; the force of medicine is homogenizing; it makes bodies the same, it produces the masses” (94). He continues:

In seeing ourselves through medicine, we integrate ourselves into the body of the masses—that abstract set of data that rules normative expectations about bodies and their behaviors. In so doing, we eradicate our differences by becoming subject to the power of medicine. It is only when our bodies react poorly to treatments, when individuals become noncompliant, that difference is reasserted. (95)

Insomnia, when it is resistant to treatment or normalization, essentially devalues the power of science, but the “problem” (if one sees it as such) is much larger. Science, via medicine, is “a form of contemporary control of the natural” but also a way to “draw on American medicine’s colonial and industrial legacies of surveillance and control of individuals and the masses. This control is the basis of our desires and intimacies” (93). To phrase Wolf-Meyer’s argument in a different way, we are
essentially coerced through mainstream discourse to trust in the power and objectivity of science and medicine. Wolf-Meyer argues that it is through this trust in science and medicine that we can be normalized, and our behaviors and desires are shaped. However, a condition that resists or rebels against scientific treatment, such as insomnia, illustrates the fallibility of science and shakes our faith in its efficacy. As a result, we become more independent, and less subject to outside normalization and homogenization. In other words, insomnia protects individuality in a society that strives for uniformity. This idea of the non-participation of insomnia in the 24/7 network to which Crary alludes to a point of agreement between Crary and Wolf-Meyer despite their divergent views on the “danger” of insomnia: they both feel, in a sense, that insomnia “protects” individual autonomy.

Summers-Bremner offers a similar view on the “problem” of insomnia today:

The wired world cannot help us manage contingency and dependence, the true price of interconnectedness, to the text that these are what it imagines it excludes. In response to this world, insomnia is not only a nightmare mimicry of the idealized instantaneity, however—too many thoughts occurring all at once, too quickly!—but also a form of historical consciousness because in the absolute unknowing it calls us to—we are unable to continue worshipping ‘the now’. Insomnia shows that although we can study the world repeatedly, we can never study it with our own being fully included, just as we cannot be awake and asleep in the same moment. (148)

Summers-Bremner’s argument is a synthesis of the arguments made by Crary and Wolf-Meyer. She shares Crary’s view of insomnia as revelatory and as a source of exclusion from the 24/7 network of capitalism and modern technology. She also expresses Wolf-Meyer’s interpretation of insomnia as a form of non-compliance with social norms and the illusory capacity of medicine to truly eradicate individual difference. For Summers-Bremner, it is not the insomnia that is chimerical, as Horne
and Randall posit, but rather the idea that we can fully illuminate both the world and ourselves that is the illusion. She points to the inability of science and medicine to be fully objective because, after all, scientists are humans too. We cannot eliminate ourselves in the study of ourselves, or as Louis Althusser argues:

What seems to take place outside ideology . . . in reality takes place in ideology. What really takes place in ideology seems therefore to take place outside it. That is why those who are in ideology believe themselves by definition outside ideology: one of the effects of ideology is the practical \textit{denegation} of the ideological character of ideology by ideology: ideology never says, ‘I am ideological.’ It is necessary to be outside ideology, i.e. in scientific knowledge, to be able to say: I am in ideology (a quite exceptional case) or (the general case): I was in ideology . . . Which amounts to saying that ideology \textit{has no outside} (for itself), but at the same time \textit{that it is nothing but outside} (for science and reality). (118-19)

Science and medicine can create the appearance of being outside of ideology, but such placement is impossible.

Williams supports Summers-Bremner’s view of insomnia as a nemesis to medicine. He argues that insomnia “was a condition characterised more by controversy than consensus, idiosyncrasy than typicality, regarding its nature and status, including diagnostic difficulties and frequent discrepancies between subjective and objective estimates of sleep loss” (\textit{Politics} 121-22). Again, we see this recurring argument among the sociological studies of insomnia and sleep that points to insomnia as a condition that eludes and defies modern scientific-medical knowledge and the power of culture and science to effect homogenization and full integration. If anything, insomnia cannot be treated \textit{en masse}, and thus the insomniac individual remains apart. Efforts to look at the insomniac as part of a group of insomniacs have ultimately failed in terms of consistency of symptoms, diagnosis, treatment, and
resolution. Essentially, insomnia remains a citadel of individuality in an increasingly de-individualizing, interdependent, and inter-connected world, something that modernist literary authors, as well as physicians, pointed to decades before.

**Insomnia in the Humanities**

Then, if insomnia must and can only be regarded on a case-by-case basis, the humanities offers us the ability to truly examine the individual experience of insomnia, with various authors providing highly personal and divergent views. The humanities presents a series of perspectives on sleep studies, which I will categorize in three general directions. First, there are philosophical explorations of sleep and insomnia, the most recent of which is French philosopher Jean-Luc Nancy’s *The Fall of Sleep* (2007), which examines the ontological implications of sleeping, falling asleep, and failing to sleep. Additionally, writers like Blake Butler in *Nothing: A Portrait of Insomnia* (2011) and Bill Hayes in his autobiographical text *Sleep Demons: An Insomniac’s Memoir* (2001), write phenomenological and ontological accounts of their insomnia and its impact on their lives and interpretation of the world, but both also incorporate philosophical, literary, medical, and historical perspectives on sleep and insomnia. Finally, there are some recent studies of insomnia and sleep as it is presented in fictional literature as it relates to authorial experience, including Herschel Farbman’s *The Other Night: Dreaming, Writing, and Restlessness in Twentieth-Century Literature* (2008) and Peter Schwenger’s *At the Borders of Sleep: On Liminal Literature* (2012). Similar to the insomniac memoirs mentioned above, these texts examine insomnia as a productive, generative state, but use literary and philosophical texts, rather than historical ones, as primary sources.
Nancy’s text focuses mainly on the space between sleeping and waking, the elusive moments during which one “falls” asleep, a word which implies movement though the body is still. Though Nancy is French, his writing is applicable to both American and British society because of the homogenization of Western culture present in our increasingly globalized world, which Nancy addresses in his text. Nancy’s primary argument is that sleep eradicates the subject but preserves the self, again associating sleep with individuality and non-participation in larger systems of production. For Nancy, “There is no phenomenology of sleep, for it shows of itself only in its disappearance” (13). No “subject” can experience sleep because the subject does not exist in the sleeping state, at least to himself or herself. He discusses the slippage of the self during the time of sleep, arguing that during sleep, “I myself become indistinct. I no longer properly distinguish myself from the world or from others, from my own body or from my mind either” (7). Nancy makes an important distinction between the self as “I” and the self as soul. During sleep, the “I” (or self as subject) disappears, but “never does the soul sleep” (35). Sleep is a “vanishing” of the individualized self, as well as a return to the self through the loss of the “I,” but more importantly, it is a respite from “the supposed heights of vigilant consciousness, from surveillance and control, from projection and differentiation” (11). Sleep, then, for Nancy is an escape from an integrated, 24/7 world.

Nancy demonstrates tension between the modern world and sleep, and here we see echoes of Crary’s vision of an inescapable 24/7 world in which one is always immersed in an interconnected network of a paradoxical combination of stimulation and somnolence. In such a world, sleep has lost its import: “occupying night,
invading it by work, is the obsession of systems of production” (22); sleep is again devalued. Nancy writes of this “invaded” world in more detail:

> It is possible that the world today is that way: without sleeping or waking. Sleeping standing up, waking while dozing. Sleepwalking and somnolent. World deprived of rhythm, world that has deprived itself of rhythm, that has stripped away from itself the possibility of seeing its days and its nights correspond to the system of nature or history. . . . World in shambles, out of balance, uneven enough to make sleep itself devastated by unevenness. Sleepers harassed, always on the alert, less fallen asleep than thrown into sleep, precipitated by a numbness from short hours broken by knocking sounds in the head, knocks on the door, blows or gunshots. Sleepers are not so much sleeping as knocked out, conquered at night as they were during the day. . . . Nights shot through with flashes of fire, of frenzy, of famine. Nights stripped of their very night, uprooted from darkness and shadow, thrown into the harsh light of a nuclear blinding. Sleeps that are nothing but parodies, caricatures of sleeps, heads kept buried beneath muddy water but kept from giving themselves over to the abandon of deep waters. (38-39)

In this lengthy passage, Nancy creates a dire view of sleep in the modern world. Night no longer exists, rhythms of the natural world are disrupted, sleep cannot remain undisturbed, and we no longer “fall” but are rather “thrown into” sleep. If we think of the 24/7 world in which we live today, with constant access to lighting, media, and various forms of stimulation, his arguments make sense. The idea of being “knocked out” rather than asleep speaks to our society’s use of prescription medications and other self-prescribed substances to aid in sleeping. His argument also resonates with Crary’s point of insomnia’s ability to expose the non-sleeper to the horror and violence of our current world. One who is awake at night can witness the violence of the world.

However tied into contemporary life as Nancy’s view of sleep and waking today seem, as Horne argues regarding our complaints of sleep over the past century,
the world Nancy depicts may have existed for a hundred years or more, not simply coming into being recently, but continuing along a trajectory that began in the middle of the nineteenth century. Take the following passage from Thoreau’s *Walden*:

> We do not ride on the railroad; it rides upon us. Did you ever think what those sleepers are that underlie the railroad? Each one is a man. . . . The rails are laid on them. . . . They are sound sleepers, I assure you. . . . And when they run over a man that is walking in his sleep, a supernumerary sleeper in the wrong position, and wake him up, they suddenly stop the cars, and make a hue and cry about it, as if this were an exception. (107)

Much like Crary and Nancy, Thoreau offers a view of people as essentially sleepwalking through life, intertwined with and subjugated by the technology that has come to dominate both them and their lives. Benjamin Reiss, in an article about Thoreau’s views of sleep entitled “Sleeping at Walden Pond,” writes, “Thoreau perceived modernity as a world of unasleep, unawake zombies, hooked onto machines, fueled by neural jolts delivered by caffeinated beverages and sensational news stories . . . and occasionally being run over by the machines to which they are enslaved as they walk in a somnambulistic trance across the tracks” (15-16). Thoreau’s world is not that different from Nancy’s (ours), as Thoreau expresses a somnambulistic world deprived of “natural” rhythms, ruled by technology, and dominated by the violence of people being “run over” by their own creations. Additionally, Schivelbusch’s previously discussed arguments about the use of industrial lighting point to the fact that the nocturnal world has been turned into a state of unnatural daylight since the second half of the nineteenth century beginning the process of the dissociation of the modern world from “natural” rhythms.
Strikingly, Nancy excludes insomnia from his discussions of sleep:

“Interruptions and perturbations, including those that arise sometimes from within sleep itself, like those nightmares that wake us up in anxiety and sweat—these accidents of sleep do not belong to it” (17). His world may be sleepless, but it is not an insomniac world, just as one cannot be sleepwalking and have insomnia simultaneously. According to Nancy, the soul has essentially two states: vigilance and somnolence. The vigilant soul watches us when we are awake, and the somnolent soul when we are asleep, but “it is not the insomniac, this soul” (37).

Nancy’s view seems to correspond here with that of Horne and David Randall who argue that insomnia may be perceived, but is not necessarily “real” in the “objective,” scientific sense. Rather, insomnia is a state of alternation between sleep and waking, described by Nancy as the heavily disrupted sleep of modernity, but by Horne and David Randall as the inability to distinguish between when one is asleep and when one is awake. Paradoxically, for Nancy, insomnia seemingly does not exist (one is awake, falling asleep, or asleep), but it is also perpetual, as we live our lives not knowing the difference between sleep and waking, behaving as though we are asleep when we are awake and thinking we have been awake when we were really asleep. We are perpetually in a state of false insomnia, which we may see and understand as insomnia, but is only a series of unwitting vacillations between sleeping and waking.

Whether or not insomnia is a “real” physical and psychological state, or only “real” as an ontological state, the perception of insomnia does in fact alter one’s relationship to the worlds of both sleep and waking. Writers who study the power of insomnia in their own lives include Butler and Hayes, both of whom wrote memoirs
of their experiences with insomnia. Their interdisciplinary works are largely hybrid studies of insomnia, pointing again to insomnia as a condition that is viewed as simultaneously medical, social, and psychological, as well as highly individualized and philosophical. The one aspect of these two texts that differentiates them from others I have discussed is the focal point of the solitary individual (the author) as the primary insomniac of the text simultaneously studying and describing his own insomnia. These authors, unlike the authors discussed earlier who study insomnia to study its role in either society or medicine, study insomnia to learn something more about themselves and their own lives and perceptions.

Other commonalities are visible in Butler’s and Hayes’s descriptions of their insomnia. Their texts include an important feature lacking in the more scientific texts mentioned earlier. They both describe firsthand accounts of the emotional component of insomnia and its related sense of anxiety and frustration to a much more extensive degree. They illustrate, rather than simply discuss, the linkage between insomnia and interconnectivity with technology. Butler, for example, inserts repetitive keyboard symbols throughout his text, and Hayes refers to his “mind racing like the spell-check function on a computer, scanning all data” (3) during his bouts of insomnia. Both Butler and Hayes express the futility of medical attempts at treating their insomnia and skepticism about the use of prescription drugs in its treatment. The importance of these two memoirs comes primarily from the ability of these two authors to present extended case studies of insomnia that illustrate the role of insomnia in producing the individual and influencing the interpretation of the self and experience.
Despite choosing to write about insomnia and its impact on their lives, even the self-proclaimed insomniac authors see insomnia as a possible issue of perception rather than reality. Lifelong insomniac Butler notes that:

> Problem sleepers often interpret their rest conditions to be more severe than recorded sleep times and depths may, to someone outside that skin, make them seem. In some self-perceived ‘insomniacs’ there might be no sign of a disrupted state at all—and yet, in their mind and flesh, they feel arrested, turned out, scratched. In this way, though the person never experiences a full-blown, calculable sleep session, he or she does transgress the phases of consciousness, blurring the mind, allowing rest. Many claims to extensive insomnia are, then, not only questionable, but perhaps even delusional. It becomes difficult to say.

Hayes also confesses to a failure to realize when he has slept. He writes, “Every so often, [his partner] Steve begged to differ with my morning-after reports. Adamant that I hadn’t slept more than an hour the night before, for instance, I’d be shocked to hear him say, ‘You were sound asleep from three to five at least.’ . . . Uh oh, caught in a lie that I didn’t even know I’d committed” (267). According to Hayes, sometimes an insomniac’s claims of sleeplessness stem from “a twisted pride” in not sleeping, but Hayes acknowledges the possibility of a condition known as “sleep state misperception” in which despite “all evidence to the contrary, a person claims to be an incurable insomniac” (267).

Both Butler and Hayes acknowledge not only the possibility of insomnia as delusion, but also insomnia as a state of unknowable alterations between sleeping and waking, thus, not necessarily a state distinct from either but a state of blurring of both, such as Nancy describes. Butler comments, “Eventually, inside of troubled sleep, the sleeping and not sleeping begin to feel the same” (112). Butler and Hayes both account for the possibility of insomnia as a state of delusion rather than reality, but do
so more tentatively. Instead of saying “it is difficult to say” whether or not someone has “real” insomnia, Butler says it “becomes” difficult to say. His use of the word “becomes” here implies this particular definition of insomnia not as lack of sleep, but lack of awareness of sleep, as a relatively recent development. Similarly, Hayes proposes the idea of insomnia as a matter of self-perception with implications for identity: “What I insist on calling insomnia, [my father] calls a few lousy nights’ sleep” (321). What one may regard as an occasional inconvenience becomes an important component of identity to another—even if both have similar symptoms.

If we take in combination the medical views of insomnia as presented by Horne and David Randall and the personal confessions of Butler and Hayes that they may be exaggerating their own insomnia, perhaps there is a current movement not only to eliminate sleep, but to eliminate insomnia as well. This elimination of insomnia does not come through treatment, but rather denial, through simply changing one’s perspective on what insomnia is or is not. This “trend” points to a paradoxical relationship between the mind and body. Just as insomnia exposes a tension between desires of the mind and desires of the body, this movement towards viewing insomnia as a mere matter of misunderstanding of the self reveals a different tension. Is the “true” self that we “know” the one that is measured through scientific standards like brain waves and objective observation? Or, is the “self” a product of what we believe to be our experiences? Ultimately, to treat a condition that involves a conflict of will and autonomy, one must will oneself to believe that the condition does not really exist.
Yet, there seems to be no doubt in Butler’s or Hayes’s minds that their own insomnia is quite real and plays a substantial role in their lives and relationships.

Butler, for example, claims to have been awake for a full 129 hours (106). Further emphasizing the reality of his own insomnia (but also its illusory nature), Butler describes it largely in spatial, physical terms. At one point, he describes insomnia as a barrier to entering the room of sleep (13-14). He presents insomnia as a physical movement of the mind and reshaping of the body:

The fear of sleeplessness breeds more sleeplessness, and the locks begin to change around the keys, the mind turning activated inside a tired body, full of no distinct direction. The air of what wants out or on inside the head in growing tired and staying tired makes days seem brighter, thicker... As well, in the context of the body, the skull might seem thicker made around the eyes, or softing. The pupils just set deeper in the head now, new fat black edges around the seen. One might feel degrees warmer inside oneself, though the skin itself is as any day, as if cooking too deep beneath the outer surface to be detected. The head may seem sunken in itself, unseen layers laid over layers, like a helmet or a gown. (102)

In this passage, we again see the image of sleep as an inaccessible room with changing locks as the insomnia persists. But, more significantly Butler presents insomnia not just as a delusion, but as a series of perceived changes to the structure of the body and mind. Because the body is not literally changing in the ways Butler suggests, even the very real physical description he provides of his insomnia’s physical symptoms contains an element of illusion and non-reality. He also dissociates himself from this particular passage, never referring to himself specifically, but rather as an amalgamation of generalized body parts. Insomnia, despite its real effects on his day-to-day life, at least partially remains an illusion, and
throughout his memoir insomnia is described in terms of abstractions vacillating in and out through other philosophical and medical observations about sleep.

For Hayes, insomnia does not take on the surrealistic quality it does for Butler. Where Butler presents insomnia as amorphous and surreal, Hayes views it as having a clear, consistent relationship to ongoing circumstances in his life. For him, sleep is “more like an emotion than a bodily function” (5). Along these same lines, Hayes describes his insomnia as intrinsically connected to other emotional components of his life, specifically his relationships with his family. He writes:

My insomniac fate was sealed when the plane touched down in Spokane. Dad ran the city’s main pop factory from the time I was a little boy until the year I left for college. I drank so much Coca-Cola growing up, I cannot take a sip of it today. I’ve often wondered if all that sugar and caffeine altered my neurochemical makeup, turning me into the altered, anxious man I am. I suspect it still runs in my veins at night, nourishing my sleeplessness. (44)

Of course, he realizes logically that “The half-life of caffeine in adults is four to six hours, not thirty-six years” (44), but the important point he makes is that his insomnia is significantly connected to his family’s circumstances.

Butler and Hayes are creating a contemporary insomniac text, indicative of the prevalence of insomnia today, but also the complex nature of insomnia as medical, psychological, and philosophical. Despite the seemingly new nature of these two memoirs, insomnia has played a significant role in literary creation for the past century. Modernist authors, many of whom were themselves insomniacs, created insomniac texts and personal descriptions of their own insomnia in diaries, essays, and letters. Studying these modernist contributions to the discourse of insomnia is my primary goal, but other authors have also looked at the role of insomnia in the
literary work (though from a different angle than I will use). Analyzing the role of sleep in literature is not a new idea. However, texts such as Farbman’s and Schwenger’s do not simply examine sleep, but rather look at sleep as part of a larger continuum of consciousness and unconsciousness. Their writing does not focus on the symbolic value of sleep alone, but rather examines the states surrounding sleep, including falling asleep, dreaming, awakening, insomnia, and sleep-like states, such as somnambulism and hypnogogia. These texts are fairly recent and support the emergence of sleep studies as an important, interdisciplinary field, which looks not only to science but also philosophy and literature for answers about the significance of the threshold of separation between consciousness and unconsciousness. Both examine this space between consciousness and unconsciousness as integral to processes of writing and reading, creation and interpretation.

Farbman organizes his book around authors, focusing primarily on four: Sigmund Freud, Maurice Blanchot, Samuel Beckett, and James Joyce. Even in his choice of subjects to examine (a psychologist, a philosopher, and two literary authors), we can see the interdisciplinarity of sleep studies on display. Farbman’s main premise is to examine sleep and waking as oppositions that cannot exist simultaneously, but at the same time, are completely dependent on one another. He writes, “Where there is no possibility of sleep, there can be no waking in this ordinary sense” (2) and “Waking life ends where sleep begins” (3). However, despite the dependence of waking on sleep and vice versa, sleep and waking are in constant tension, represented by the dream, which he describes as “resistance to the stillness of sleep” (5). Because “complete sleep would be death” (3), the dream is a reminder
that we are alive even though we are asleep; rather than being the guardian of sleep, as the dream is for Freud, it is the guardian of life itself. He argues that “The dream is not an escape from the world and worldly responsibilities. It is rather nightly evidence of the impossibility of escape, so long as one is alive—the impossibility of complete sleep” (18). His text seeks to compare the dream to the act of literary creation, not in the sense that dreams inspire writing, but rather that dreaming and writing are phenomenologically similar. He says, “This book argues that this nightly experience that can’t be shared is an experience of language as shared—of the sharing of language—and that experience is essentially literary” (10). The dream is a paradox of unconsciousness and isolation only made possible through consciousness and communication. It represents the impossibility of complete unconsciousness while alive, thus, the dream itself is a form of insomnia: “The dream, for Blanchot, is the pure perpetuation of insomnia—‘the impossibility of sleeping’ that we encounter in the very heart of sleep” (51).

Because the dream and insomnia resist complete unconsciousness akin to death, “it may imply a kind of triumph over death” about which Farbman argues regarding Joyce’s image of the “ideal insomniac” in *Finnegan’s Wake*. The “ideal insomniac” envisioned by Joyce, however, is “more like a dream than it is like the real ordeal of the real insomniac, who will in fact catch some sleep here and there” (91). For Farbman, there are two distinct types of insomnia: “real” and metaphorical in the sense Blanchot uses. Real insomnia is a form of suffering, but one does eventually sleep, though sleep is delayed. One wants to sleep and, subsequently, loses his or her sense of self when it arrives. The metaphorical insomnia Farbman
discusses is not a postponing of sleep, but rather restlessness within sleep, an affirmation of life in the face of the loss of the self. This restlessness is similar to the restlessness involved in literary creation: “Though none of the writers studied in this book claims . . . that works of writing are produced in his sleep, each brings to the fore of his work the restlessness that persists even in the depths of sleep, and each experiences that restlessness as an indication of the inevitability of writing” (17). Writing becomes an affirmation of living and means of resisting death—retaining a form of consciousness and communication from a space of unconsciousness and isolation. Writing is an act of metaphorical insomnia.

Again, we see an example of insomnia as a matter of perception (I perceive, in the dream, that I am awake even though I am “really” asleep), but also a form of perception that, as Butler and Hayes indicate, has profound implications for waking experience. Schwenger uses his analysis of insomnia differently than Farbman, but essentially views it in a similar manner. He argues, “The desire for sleep, then, is not only a desire for rest so that we can ‘recharge our batteries’ for the day’s work; it is also the desire for a respite from existence itself, from its incessant, unrelenting movement” (57). Like Farbman, Schwenger sees sleep as “the brother” of death (57), and insomnia is again a resistance to death. Where Farbman uses the dream as insomnia, Schwenger takes the example of pre-sleep insomnia, arguing that “the writer’s relationship to insomnia goes beyond . . . such common causes as an inability to relinquish the concerns of the day or a subliminal fear of death; insomnia becomes the very source of writing” (58). Basically, the difference between the perspectives of Schwenger and Farbman is spatial: insomnia for one exists within sleep and for
Unlike Farbman, Schwenger structures his text not around authors, but around states of sleeping or non-sleeping, including falling asleep, failing to sleep, waking up, and disordered sleep. This structure makes sense in his argument because he discusses the role of each of these states not only in creating, but more importantly structuring, the literary text. For Schwenger, insomnia is a perpetuity of thought, but not as the normal daytime running monologue one might experience. Rather:

In the night one reaches no resting point, no conclusion or illuminated ‘secret’ that is not immediately eroded by the continuing flow of thought; and with all the structures of daylight thinking dissolved in the night, the strangest adumbrations are free to appear. Their strangeness means that they cannot be owned or intimate: we do not think, it thinks. (60)

Insomnia has a sort of “dream logic” but “is stripped of the acquiescence that carries us through our dreams” (63). Insomnia itself does the thinking, rather than the insomniac. This type of insomniac thought, or insomnia as cogito existing through its own thought, always running, but never reaching a conclusion, half way between conscious and unconscious, can be translated into literature in several different ways. Schwenger uses the example of Kafka, citing the “liminality” and “circular” nature of his writing (64-65). Additionally, again with reference to Kafka, we see the failure of resolution in the insomniac text: “The more the insomniac pursues problems in the night, the more they lead inevitably to a final dis-solution, which is not a resting point, but rather, ‘percussive stillness’” (66). His final quotation refers to the work of Blanchot. Insomnia, then, similar to writing is “something in the writer but beyond the writer” and both writing and insomnia occur “in a liminal realm between the

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modes of daylight and night” (71). While for Farbman, dreaming and writing are similar, both in their creation and their communicatory effects, the same is true for Schwenger with insomnia and writing.

Thus, we have come full circle. The only truly consistent factor in sleep studies is that they always present both one argument and its opposite. Medical experts argue that insomnia hampers productivity. Literary critics and authors argue that it is essential to productivity. Medical experts argue that to study insomnia one must study the biography of the insomniac. Insomniac memoir writers argue that insomnia generates the biography to be studied. Scientists argue that the perception of insomnia is not necessarily reality. Literary writers counter that perceiving insomnia makes it a reality. Medical science and capitalist systems of production seek to cure insomnia through technology and medication. Authors in the humanities and social sciences posit that technology and medication perpetuate the problem rather than present any sort of possible solution. A condition that seems so easy to define—not being able to fall asleep when one desires sleep—resists definition.
CHAPTER 3

NO REST FOR THE WAR WEARY: INSOMNIA AND COMBAT

Towards the end of his World War I autobiography, *Goodbye to All That*, Robert Graves describes his physical and mental condition after the war as follows: “Very thin, very nervous and with about four years’ loss of sleep” (288). Through this statement, “four years’ loss of sleep,” Graves relates the experience of war to the condition of insomnia. His use of metonymy, substituting sleeplessness for war experience as a whole, creates a powerful metaphor through which he is able to express the restlessness, anxiety, exhaustion, isolation, helplessness, and physical discomfort associated with his life during the war. Metaphors of exhaustion and insomnia are particularly relevant to World War I, a war which ultimately became a matter of which side could wear down, or tire out, its opponent first. Yet, as with the onset of sleep, neither side knew when the other would first exhaust its abilities to fight, making the war appear to be unstoppable, much as wakefulness seems to the insomniac.

In his WWI novel *A Farewell to Arms*, Ernest Hemingway’s characters often comment on the way in which the war seems to carry on infinitely. For example, a soldier named Passini remarks, “[The war] doesn’t finish. There is no end to war” (50). Narrator Lieutenant Frederic Henry thinks to himself, “Perhaps wars weren’t won any more. Maybe they went on forever. Maybe it was another Hundred Years’ War” (118). And, Catherine Barkley, the British war nurse and then-pregnant girlfriend of Henry, jokes cynically, “For three years I looked forward very childishly
to the war ending at Christmas. But now I look forward till when our [as yet unborn] son will be a lieutenant commander” (141). The sentiment Hemingway’s characters express was commonplace during the war, which is one often described as a “war of attrition” (Fussell 10). As Paul Fussell explains:

[T]he likelihood that peace would ever come again was often in serious doubt during the war. One did not have to be a lunatic or a particularly despondent visionary to conceive quite seriously that the war would literally never end and would become the permanent condition of mankind. The stalemate and the attrition would go on infinitely, becoming, like the telephone and the internal combustion engine, a part of the accepted atmosphere of the modern experience. (71)

Much as during a bout of insomnia, the insomniac feels that it will be the permanent condition of his or her life, so felt citizens and soldiers during the Great War.

Significantly, Fussell notes the connection between war and modernity, positing an inextricable relationship between the two. War, and its associations with perpetual stagnation, claustrophobia, and exhaustion, characterized the modern experience. As such, many novels written about the war depict insomnia as an experience common to both soldiers and civilians. Insomnia is a particularly significant device through which to expose this condition, in part because of its associations with helplessness, isolation, anxiety, and frustration, feelings that are familiar to many who have experienced war. Further, insomnia mirrors the liminality of the war itself, which often left individuals feeling trapped between states of hope and hopelessness, activity and inactivity, bravery and cowardice, and patriotism and cynicism. Insomnia is often symptomatic of a conflict between internally and externally constructed identity; it puts in contrast identity as a soldier and identity as an individual. In doing so, it reveals conflicting desires and the tensions these desires
create. Insomnia can be described as a conflict of desire and need between the mind and body—one desires or requires rest while the other desires or requires activity. For example, even though the body of a soldier may be exhausted, fear of nightmares related to the war may make him reluctant to sleep.

More importantly, the necessity of insomnia reveals the true extent to which modern society, especially a society at war, abolishes the “private” individual. According to Jürgen Habermas, “The fully developed bourgeois public sphere was based on the fictitious identity of the two roles assumed by the privatized individuals who came together to form a public: the role of property owners and the role of human beings pure and simple” (56). If we substitute “soldiers” for “property owners” in this quotation, Habermas’ argument applies especially well to war; the soldier’s body becomes public property, so even the “privacy” associated with sleep and one’s control over one’s sleep are matters of public interest. Insomnia exposes the tension this situation generates for individuals robbed of their sense of privacy, “fictitious” though it may be. The soldier is expected to sleep when he can to be alert and prepared for duty, as his nation depends on his capabilities; the man, on the other hand, may find that the only time he has to himself is when others are sleeping, so might keep himself awake in spite of his duties. Insomnia becomes a means of reclaiming a feeling of privacy within in a space (army camp, hospital, or trenches) where privacy is otherwise nearly impossible.

The three texts I will discuss in this chapter are all fictional works that take place, at least in part, during World War I: Ford Madox Ford’s Parade’s End tetralogy, Siegfried Sassoon’s Memoirs of an Infantry Officer, and Hemingway’s
aforementioned *A Farewell to Arms*. These literary texts provide evidence of the way in which the contemporary discourse regarded sleep habits and failures and characterized and understood those who suffered from insomnia, as well as make specific connections between sleep behaviors and war experience. They expose expectations regarding the depth of one’s obligation to one’s society, the society’s dependence on individual complicity, and the extent to which individuals during this time period were expected to maintain and subsume themselves to discipline over their bodies and minds, regardless of the degree to which that particular form of discipline is actually possible. The texts use insomnia as a metaphor to represent the tension between allowing one’s body to be used for the “greater good” of the war effort and maintaining one’s independence of mind and body at the same time, a tension frequently resulting from idealized images of both men and women in a time when these ideals were both necessary to the war effort and in flux because of it.

Both men and women were expected to sacrifice themselves and their bodies to the war effort, men through the giving over of their bodies to the army and women through their roles as nurses and ambulance drivers, but also as the encouragement and motivation behind the more obvious and immediate sacrifice of their sons, husbands, and brothers. The tension created through this sacrifice involves images of idealized manhood in the form of the men’s ability to maintain self-control, stoicism, and taciturnity through conditions of extreme physical and emotional stress, yet still submit their bodies and minds to military discipline. Females were no less subject to images of idealized womanhood as they were expected to maintain the role of domestic guardian, as well as facilitate male participation in the war, knowingly
encouraging loved ones to take substantial risks. In short, men were expected to be in control of themselves and disciplined, and women were expected to protect and care for men through their jobs as nurses and mothers, as well as support the sacrifice of these same men through encouraging them to fight.

**War Fatigue**

Writing in July of 1918, Guthrie Rankin notes the connection between the war and insomnia: “In these strenuous times there has been probably no greater interference with the ordinary comfort of humanity than the broken sleep that has become such a widespread experience since the outbreak of the war” (“Broken Sleep” 77). Not only does Rankin see the pervasiveness of insomnia as troubling, but also as more detrimental to health than disease more generally, arguing, “Life is no longer a struggle to escape accident and disease, but has become a purgatory of suspense and bereavement” (77). His use of the word “purgatory” suggests his feelings, shared with many of his contemporaries, that the war is a sort of temporal punishment; it may eventually end, but no one knows when or what one must go through before that end. Yet, while the war continues, people remain trapped in a hellish nether-world, awaiting their final judgment and the judgments on their loved ones.

When faced with such a circumstance, a seemingly endless war that involved perpetual stalemates and long periods of stagnation, it is not surprising that one of the major concerns of those in charge of the war effort became the fitness and vitality of troops. Fitness, both physical and emotional, was crucial, not only because troops needed to be strong to physically dominate the enemy, but also because they needed to be strong to withstand attacks for extended periods without breaking down
mentally. As Fussell argues, “In the three lines of trenches the main business of the soldier was to exercise self-control while being shelled” (46). Interestingly, Fussell does not describe the duty of the soldier as valiantly charging in an attack, using his strength to overpower an enemy soldier, or using his skill with a rifle to take one down, but rather being able to keep himself together the longest while under attack. Fussell uses the term “self-control,” but perhaps a better term might be discipline, as self-control implies personal agency; whereas discipline involves subsuming personal agency to training. Discipline often took on the guise of self-control, but as General Campion in Parade’s End asks, “What was discipline for if subordinates were to act on their consciences?” (481), suggesting that discipline means simply having the self-control to give over control of oneself to the military and one’s superiors. In essence, to win the war one side had to be able to outlast the other side, hoping the other side became too exhausted and undisciplined to continue fighting or hold a position. As a result, the war was fought not only militarily, but medically, with doctors being consulted not only to treat wounded soldiers, but also to discern the most effective ways to keep the soldiers in a prolonged state of controlled readiness by keeping them as healthy, sane, and alert as possible.

According to Anson Rabinbach, “The fitness of troops became an important medical concern, as did the deployment of their skills in the war effort. The war required the maintenance of their physical and psychological capacities to sustain morale and combat” (260). In order to maintain this “fitness,” “Experts on fatigue, on production, on industrial hygiene, and on nutritional physiology were enlisted in the staggering redeployment of national energy” (Rabinbach 260). In such a war in
which more often than not victory came not through killing other troops, but keeping
one’s own troops alive, having troops available takes on a meaning more complex
than simply having enough healthy men to fight. The capability of fighting rested in
more than a lack of physical ailments for the soldier, requiring the mental fitness
needed to endure long periods of waiting in often very uncomfortable, stressful, and
anxious situations. As such, issues like fatigue came to the forefront of medical
research during this period.

David Randall explains the significance of combating fatigue in war through
tracing battles that may have been lost due to nothing more than the fatigue of the
troops. Referring to the 1942 Battle of Guadalcanal in World War II, he argues:

With so little sleep after days of combat and the need to maintain a
constant state of readiness, the men aboard those ships simply weren’t
able to react to an attack that came in an unexpected form. Their
brains could not shift their cognitive framework from scouring the
skies to patrolling the waters, missing the [Japanese] boats in plain
view because they had their minds locked on the idea that enemy
planes were the greater danger. (142)

Though David Randall claims the American military first “noticed that lack of sleep
could severely undermine the discipline of troops going through routine chores” in
1959 (142), Rabinbach situates this realization earlier, during World War I, as I have
previously cited. Regardless of their disparate timelines, the point remains that
fatigue is a significant issue with which militaries must contend. The efforts to
control fatigue among troops persist today, and the stakes are quite high:

Fatigue, long the overlooked nemesis of military efficiency, can soon
be regulated and quantified as easily as food rations or bullets. In one
report, [Thomas] Balkin estimated that in future conflicts, the number
of friendly-fire accidents will plunge toward zero, all on account of the
increased decision making abilities made possible by sleep. (D.
Randall 151)
If the military is able to ensure a supply of rested troops, accidental deaths can possibly be eliminated, keeping more troops alive and available to continue fighting.

However, actually enabling soldiers to rest adequately is a problem that we are still not able to solve, and certainly had not overcome during WWI. Rankin, who advises insomniacs to attend to regularized routines to treat insomnia acknowledges that his advice cannot often be applied to soldiers or others involved in the war because “under war conditions the normal nights of many have become disturbed and restricted” ("Broken Sleep” 77) thereby preventing them from regulating sleep habits effectively. Fussell explains:

Normally the British troops rotated trench duty. After a week of ‘rest’ behind the lines, a unit would move up—at night—to relieve a unit in the front line trench. After three days to a week or more in that position, the unit would move back for a similar length of time to the support trench, and finally back to the reserve. Then it was time for a week of rest again. (45-46)

Despite the apparent time for “rest” allowed during the weeks when troops were not in the actual front trenches, the disruptive, nocturnal schedule of trench life during which it was “after evening stand-to” that “the real work began” (Fussell 47) likely created havoc among the troops’ sleep schedules. Even soldiers and war workers on the Italian front (and not in the trenches), such as the ones Hemingway describes in A Farewell to Arms, are required to transition to a nocturnal schedule. For example, in the novel’s opening, Henry describes hearing the sounds of fighting and the flashes of shells in the dark, noting that “There was much traffic at night” (3-4).

Being forced to continually rotate working shifts, sometimes following a traditional sleeping/waking schedule and other times being expected to sleep during the day and remain nocturnally active, creates myriad sleep-deprivation related health
issues. The schedule Fussell describes resembles the shift-work schedule many employees adopt when working in fields, such as medicine or industrial work, in which businesses are open twenty four hours a day. Stanley Coren defines shift-work as work in which the worker must labor outside of the traditional 7 am to 7 pm hours. The schedule of soldiers in the trenches, as Fussell describes, follows what Coren defines as a rotating shift-work schedule, which includes a fluctuating combination of day and evening work and wakefulness. This type of schedule is extremely stressful for the individual. According to Coren, “shift work is a remarkably efficient device for disrupting an individual’s normal sleep-wakefulness pattern” primarily because it “[disorganizes] our circadian rhythms” forcing the workers to “fight against their own internal clock” (209). Rotating shift work of the nature soldiers experienced with their trench and duty schedules is particularly problematic because it prevents the individual from ever fully acclimating to a new sleeping-waking schedule. Coren explains: “If you stay on a particular shift long enough, your internal clock will eventually adjust to it. Unfortunately, some people on the night shift never allow their body to make this adjustment because they never give it a chance” (211). The consequences of a perpetually disrupted sleep schedule include “excessive fatigue, reduced work efficiency, and tendencies to be irritable, depressed, and generally unhappy” (Coren 211). In effect, the military, in its attempts to give soldiers adequate rest by keeping them away from the front-line trenches and its related nocturnal routines for two weeks at a time, ultimately fostered and perpetuated insomnia, fatigue, and generally disrupted sleep schedules by never giving soldiers “the chance” to acclimate to a fully nocturnal routine.
Further complicating the issue of sleep at war is the perceived relationship between having the ability to go without sleep and the idealized masculinity expected of soldiers. Coren uses the medical discipline and its tradition of requiring those to the field to work extended hours as an example. According to his source, a medical school dean, requiring (initially male) doctors to remain awake for long periods of time is a Darwinian method of weeding out the ineffective, or weak, ones:

Before World War I the way that you obtained your graduate medical education was through an actual apprenticeship. You could say that the medical hierarchy was quite selective and exclusionary, and the gateway to the profession was the internship. . . . This means that the profession dictates that you must make the training really hard and the hours really long so that it serves as an effective barrier screening off the domain of the practicing physician. This will serve to limit the number of trainees who actually make it to the status of full-fledged physician. If you survive the long hours, the work, the lack of sleep, then you have shown that you, too, are a hero with super-human qualities. As a hero, you can join the ranks of other heroes, those who, like you, have bested the challenge and have been rewarded with the honorific title of “Doctor.” (qtd. in Fussell 204)

The associations specifically within the medical discipline, stemming from pre-WWI values of masculinity (physical strength, vigor, self-control and endurance) create a real tension between expectations of fatigue tolerance and efforts to minimize fatigue. As I have noted earlier, Rabinbach points to the efforts of WWI doctors to combat and prevent soldier fatigue. But, conversely, these very same doctors were raised in a tradition in which masculinity is defined, in part, by the ability to tolerate and overcome fatigue. Thus, we have a situation in which the values and practices of the medical discipline are in direct conflict with its ostensive goals on behalf of those it is attempting to treat, in this case soldiers. The discourse on sleep and waking becomes itself a sort of tension: fatigue must be controlled and monitored, yet the strong
individual should be able to tolerate fatigue internally rather than require external supervision or assistance.

This mentality based in idealized masculinity is also reflected in beliefs regarding the treatment of soldiers for war trauma, also referred to as both “shell shock” and, aptly, “war fatigue.” Such a mentality engendered the belief that the best treatment for war shock came not from a removal from the conditions of war, but rather through a reminder of the importance of military discipline. An article entitled “‘Nerve Shock’ in War” published in *The British Medical Journal* in July of 1915 notes that in cases of “nerve shock” “the prospect of discharge from the army [for the afflicted soldier] was apt to delay recovery” (64). As Paul Lerner argues regarding the military treatment of shell-shocked soldiers in Germany:

> One consequence of rationalized psychiatric treatment was that humanity and sympathy were removed from the psychiatrist’s office. Pity and charity were decried as effeminate and even pathogenic impulses; which the assertion of medical control over all phases of the diagnosis, treatment, and rehabilitation of neurotics, doctors exploited the therapeutic efficacy of military discipline and industrial functionalism. (20)

Though Lerner comments specifically on the German military, his observations are equally applicable to the British and Americans. An article by G. Elliot Smith published in *The British Medical Journal* in July of 1917 calls for “the more rational treatment of what might be termed more minor mental maladies” and laments that “a nation so humane as the British should be so surpassed in any regard by a nation which has proved itself so inhuman as Germany” (47) regarding the methods of treatment of shell shocked soldiers. Another article, by F. W. Mott, also written in July of 1917, points to the necessity of discipline in the treatment of shell shocked
soldiers: “Discipline is very essential; laxity of discipline, over-sympathy and attention by kind, well-meaning ladies giving social tea-parties, drives, joy-rides, with the frequent exclamation of ‘poor dear,’ has done much to perpetuate functional neuroses in our soldiers” (42). Discipline, which Campion argues should substitute for conscience, also comes to substitute for self-control in cases of trauma. Paradoxically, in order to regain self-control, the soldier must first relinquish it.

A literary example of the medical focus on discipline appears in Virginia Woolf’s post-war novel Mrs. Dalloway (1925), which explores the treatment of shell-shocked war veteran Septimus Smith. Woolf, who wrote in her diary in June of 1923 that one of her goals in writing Mrs. Dalloway was to “criticise the social system, & to show it at work, at its most intense” (93), illustrates the damaging effects of that “social system” on Septimus. Part of the damage done to Septimus comes through his doctor, Sir William Bradshaw, who believes Septimus can be cured by disciplining his mind into adopting a rational view of the world that Bradshaw explains as a sense of “proportion” (283). Woolf describes Bradshaw’s societal role: “Worshipping proportion, Sir William not only prospered himself but made England prosper, secluded her lunatics, forbade childbirth, penalised despair, made it impossible for the unfit to propagate their views until they, too, shared his sense of proportion” (283-84). Later in the same section, Woolf notes that “Sir William was a master of his own actions, which the patient was not” (285). Sir William’s “treatment” of Septimus, a suggestion of prolonged, isolated rest until Septimus could be made to see the world as Sir William does, leads to Septimus’ suicide, pointing to
Woolf’s opinions on both the lack of empathy she attributes to medical professionals and failures of the disciplinary model at healing traumatized soldiers.

According to Frederic Jameson, “the will to read literary or cultural texts as symbolic acts must necessarily grasp them as resolutions of determinate contradictions” (80). The model of the text as an attempt to resolve contradictions that Jameson articulates is useful in understanding the ways in which literary texts present and treat insomnia. First and foremost, insomnia itself is a state of contradiction: the desires of the body contradict those of the mind or vice versa. Insomnia can be described both in terms of lack (lack of sleep) and presence (presence of insomnia as a state). But beyond insomnia itself, medical and military discourse is also contradictory. It proffers the message that care of the self as a soldier is necessary for the survival of nations. The men (and women) must be rested, healthy, sane, and prepared to fight for their country. At the same time, those who purvey this message also feel that the truly strong and masculine self can transcend the need for self-care and expect the woman to willingly sacrifice herself and her loved ones for the good of others, as caretaker of her family or the sick and mother, sister, or wife of the soldier. The will to serve one’s country should overcome to the will to serve oneself. Hence, the discipline of the military serves two conflicting functions: to teach oneself to behave in a manner that optimizes one’s ability to be productive (sleeping well, eating properly, avoiding vice) and to teach oneself to subsume the self’s needs for the greater good (go without sleep, food, or comfort). The literature of WWI, then, attempts to expose and resolve these conflicting views of one’s responsibility as a soldier and frequently does so through the medium of
insomnia. In the texts of Ford, Sassoon, and Hemingway, insomnia becomes a vehicle through which one can both exercise (or exorcise) expectations of masculinity through self-deprivation, yet still focus on individualized care of the self through allotting insomniac-time to more private, individual needs. Simultaneously, the function of insomnia is to valorize masculine strength and transcendence of bodily need, yet still afford resistance to the type of discipline which foregoes the individual’s interests for the needs of the masses.

**Discipline**

Given the reliance on the military of having soldiers fit for battle, not taking opportunities for sleep indicates a resistance to discipline on the soldier’s behalf, prioritizing his individual concerns over his role within the military when it comes to his “care of the self”: an act tantamount to insubordination. According to Michel Foucault, since the Classical Age, the human body was viewed as an “object and target of power,” allowing those in authority to see the “docile” body as something to be “subjected, used, transformed, and improved” (*Discipline* 136). One of the means of objectifying and controlling the body is through discipline:

> Discipline increases the forces of the body (in economic terms of utility) and diminishes these same forces (in political terms of obedience). In short, it dissociates power from the body; on the one hand, it turns it into an “aptitude,” a “capacity,” which it seeks to increase; on the other hand, it reverses the course of energy, the power that might result from it, and turns it into a relation of strict subjection. (*Discipline* 138)

Authorities, medical or military, attempt to control the actions of the body, and, in doing so, essentially exhaust the body’s capabilities thereby requiring the individual to sleep in order to begin the process of exhaustion anew. Discipline, as a controlled
expenditure of bodily energy, serves two major functions: the productivity of the body is increased in order to be used for production (profit) or power (war) and, through putting the body in constant motion, the ability to contemplate (and thus question) is lessened. As Ford’s character Valentine Wannop thinks when she comments, “You could not run a dual physical and mental existence without some risk,” (534) many believed that keeping physically active prevents thought and immobility promotes thought. A. W. MacFarlane, author of *Insomnia and Its Therapeutics*, argues that “we may predicate that sound nervous structures, properly nourished, adequately rested, and rightly exercised, are fundamental desiderata for good sleep” (29), indicating the belief that one who receives proper and balanced amounts of physical and mental exercise during the day will sleep well at night.

The type of discipline described by Foucault applies quite fittingly to the body of the insomniac. The disciplined body tires itself out during the working day, so it sleeps well at night; there is not that extra “insomniac-time” for excessive thought, as can be seen in Sassoon’s character, Sherston, who believes fully in the war while he is kept in action, yet begins to question the war when he is given time to rest and think about it in more depth and eventually adopts an anti-war stance, refusing to return to combat (510). Sherston argues that “At three o’clock in the morning a sleepless mind can welcome improbabilities and renounce its daylight skepticism” (461). Eventually, his early morning ponderings lead him to realize his desire to resist further participation in the war, which he ultimately succeeds at through pleading insanity (512). In Sherston’s case, his insomnia enables him to prioritize his individual needs over those of the military. Similarly, one may prioritize personal
needs over the war effort for using time awake for personal pursuits of pleasure and companionship as Henry does in his nocturnal relationship with Catherine Barkley, or purposes of thought, as we see with characters like Christopher Tietjens or George Sherston, the latter of whom stays awake to read a novel, acknowledging the obstacle the army’s day-to-day requirements presents to thinking “one’s own thoughts” (357); thus, he uses his “insomniac-time” as a time for personal thought. “Proper” sleeping habits entail both physical and mental discipline, in the form of salubrious living and the avoidance of “over-thinking.” Achieving this discipline increases the aptitude of the worker or soldier, allowing him or her to be more rested, and thus, more capable of fulfilling duties effectively and without question. Yet, soldiers often refused to sleep properly in an effort to attend to individual identities and concerns.

In short, because a society, and especially a society at war, relies on its individual members to be productive (produce goods, perform tasks), the larger society does indeed have a stake in how well its members sleep. Prior to World War I, both American and British society were in the midst of a great movement of industrialization, with industrial models seeking to minimize waste in order to maximize productivity, and this mentality carried over into the treatment and discipline of soldiers. Within rationalized society, “an attempt is also made to assure the quality of the time used: constant supervision, the pressure of supervisors, the elimination of anything that might disturb or distract; it is a question of constituting a totally useful time” (Foucault, Discipline 150). Parade’s End, Memoirs of an Infantry Officer, and A Farewell to Arms all illustrate the idea that it is the obligation of the individual to be healthy and productive to benefit the larger group. In fact, Tietjens,
central character of *Parade’s End*, asserts, “Sick bodies are not only of no use to the King, but are enormously detrimental to the army that has to cart them about” (581); therefore, taking responsibility for one’s health is “a duty to your children. And the King” (616). Tietjens, guardian of tradition and honor, considers these conditions “very reasonable and proper” (581), yet resists them, through his insomnia, nonetheless. Sherston of *Memoirs of an Infantry Officer* considers the idea that as a soldier he “could no longer call [his] life [his] own” (359). And, in *A Farwell to Arms*, illness is only a reason for being removed from the front if the illness is a direct result of physical injury; otherwise, soldiers, sick or not, must fight. When Henry is wounded and in the hospital, he develops a case of jaundice. Because his jaundice is a consequence of his illicit, and quite heavy, drinking, the head nurse, who initially pities him for having the illness when she thought it was a result of a shrapnel wound he sustained, comes to despise him, commenting “And I was pitying you for having jaundice. Pity is something that is wasted on you. . . . Unless you find something else [wrong with you] I’m afraid you will have to go back to the front when you are through with your jaundice. I don’t believe self-inflicted jaundice entitles you to a convalescent leave” (144). She is only concerned for Henry’s health inasmuch as Henry’s health relates to his physical war wounds, not his mental ones that lead him to drink excessively. He is no less sick, but the knowledge that his illness is self-inflicted leads his nurse to see him as more fit and prepared to return to duty than had his illness merely been a case of bad luck.

These types of moral and behavioral judgments rendered against failures to establish regularity and self-control and to keep oneself healthy are present in the
texts of Hemingway, Ford, and Sassoon, further illuminating connections among the regulation of the body and its cycles, morality, and avoidance of over-thinking to sleep habits. With regard to the regulation of behavior, Foucault argues that there are three primary ways to control time and activity: “establish rhythms, impose particular occupations, regulate the cycles of repetition” (Discipline 149). He points to the presence of such means of control in modern establishments such as armies, hospitals, and schools, and he equates the regulated and cyclical life led by members of monastic orders to “the regulations of great manufactories,” which “laid down the exercises that would divide up the working day” (Discipline 149). This same type of regularity and discipline is emphasized by the medical authorities as a means of preventing insomnia and returning the insomniac to a state of “normalcy.” In the three cases of Henry, Sherston, and Tietjens, “normalcy” is resisted through their insomniac behaviors. Henry commits all of his rebellious acts at night: from his drinking, to his relationship with Catherine, to his escape from the army, to the birth of his still-born, illegitimate child. Sherston’s insomnia gives him the time for thought he needs to actually contemplate the war, and in doing so, he comes to see the war as pointless and futile, leading to his refusal to rejoin the army and commitment to a mental hospital, and Tietjens forgoes sleep in order to ponder interpersonal relationships, which may have seemed frivolous to many during a time of crisis on such a massive scale, but for Tietjens, such ponderings allowed him to maintain his sense of individuality in an ever-depersonalizing and dehumanizing world. Insomnia is a vehicle through which all three characters can resist discipline and maintain their individualized sense of priority.
Though all three characters resist discipline through insomnia, these novels still emphasize the importance of physical and mental discipline in a wartime setting. The emphasis in Foucault’s aforementioned passage is on training the body through repetition and regularity, of which physical exercise is an example. Foucault’s argument is reflected in a passage from *Parade’s End* in which Valentine considers her job as an athletic instructor. Ford writes, “The military physical developments of the last four years had been responsible for a real exaggeration of physical values. [Valentine] was aware that in that Institution [the girls’ school], for the last four years, she had been regarded as supplementing, if not as actually replacing both the doctor and the priest” (535-36). In this case, Valentine acts as the disciplinarian. She is responsible for replicating the regularity and discipline associated with Foucault’s hospitals (“the doctor”) and monastic orders (“the priest”), instilling “physical values” in her pupils.

Valentine understands physical discipline in relation to its ability to disrupt or prevent thought. When one wants to avoid over-thinking, one can turn to physical exercise, and disciplining the body is a means of disciplining the mind. Mental over-work, which as MacFarlane claims is mostly “seen in the literary, scientific, professional, and commercial classes” is “one of the great sources of insomnia” (64). It is not coincidental, then, that in the aforementioned medical literature, both physical fitness and the avoidance of over-thinking are seen as means of preventing insomnia. Valentine also considers the connection between fitness and morality, mulling over the possibility that “the [student’s] lie was the product of an overoxygenated brain” (535). Lack of activity created an imbalance between oxygen
distribution in mind and body, leaving an abundance of oxygen left over for the brain; therefore, the student was over-using her brain, leading to the immoral act of lying. Had she been physically worn out, her mind would have been quieted and less prone to both immorality and fabrication. Valentine's cynicism regarding her role gives her some pause when drawing this conclusion, but she still does see at least a connection between physical discipline and the prevention of “immoral” behavior.

In *A Farewell to Arms*, Hemingway also associates sleep and nocturnal behavior with morality, but does so through showing the ways in which the war has changed morality. Early on in the novel, Henry admits to fearing God in the night (72). Yet, as the novel progresses, his relationship with the night becomes more comfortable and positive. As I have mentioned, Henry and Catherine have a nocturnal relationship; they are only able to see each other at night. This night life of Henry’s becomes central to his morality though many of their contemporaries would at least claim to see their sexual encounters, which take place outside of wedlock, to be immoral, Henry, on the other hand, sees his faithfulness to Catherine and hopes for their future as guardian of his morality. When discussing religion with a friend, Henry comments that “[his] own [religious feeling] comes only at night” (263). When asked what he believes in, he comments that he only believes “in sleep” (179). And, when he considers the purpose of his life, he thinks that it is to “Eat and drink and sleep with Catherine” (233), sleep meaning both sex and shared repose. It is during his nights with Catherine, when he is shirking both his duties and conventional morality, that he finds himself to be at his most moral and with the most religious feeling. War, for Hemingway, is the true source of evil, not Henry’s love for
Catherine. But, of course, conventionally, war is valorized where extra-marital sex (especially when it leads to a child) is demonized. Even when Henry commits the one action that many of his comrades would find unforgiveable by defecting from the army and escaping to Switzerland, rather than losing sleep over his supposedly cowardly and immoral behavior, he describes his sleep as peaceful, rather than full of nightmares and fears, as it had previously been: “We slept well and if I woke in the night I knew it was only from only one cause and I would shift the feather bed over, very softly, so that Catherine would not be wakened and then go back to sleep again, warm and with the new lightness of thin covers” (293). Now that Henry has pursued what he believes to be individually important (his life with Catherine) rather than nationally important (his participation in the war), he is able to rest comfortably.

Hemingway equates sleeping well with being undisciplined yet able to pursue one’s own morals; Ford supports Hemingway’s argument through exploring its opposite. Evidence of the value given to physical discipline and regulation appears in \textit{Parade’s End} in several examples, and again, as in the medical literature, physical discipline is seen in terms of a connection to morality. As Valentine contemplates the “immoral” act of becoming Tietjens’ mistress, she sees her own physical fitness as an obstacle to immorality and, in a sense, a protector of her chastity:

“Well, I’m fit…” She had an image of the aligned hundred of girls in blue jumpers and men’s ties keeping whom fit had kept her super-fit. She wondered how many of them would be men’s mistresses before the year was out. It was August then. But perhaps none! Because she had kept them fit... “Ah!” she said, “if I had been a loose woman, with flaccid breasts and a soft body. All perfumed!”... And perhaps the price she paid was just that; she was in such a hard condition that she hadn’t moved him to... She perhaps exhaled such an aura of sobriety, chastity, and abstinence as to suggest to him that... that a
decent fellow didn’t get his girl into trouble before going to be killed… (273)

In this case it is her own fitness that Valentine sees as a barrier between her and the immoral behavior of becoming someone’s mistress, believing in the possibility that Tietjens, witnessing her physical fitness, was dissuaded from the idea of seducing her. She cannot even bring herself to articulate the relationship in explicitly sexual terms.

Yet, she acknowledges that two other women in the novel, Sylvia Tietjens and Edith Ethel Duchemin (later Macmaster) are simultaneously physically fit and “immoral.” However, the novel makes quite clear that Valentine and Tietjens should pursue their relationship despite its social impropriety. *Parade’s End* exposes the disconnection between the appearance of physical discipline and morality.

Despite the adulterous actions of Sylvia and Edith Ethel, their physical fitness is still equated with a form of cleanliness, simulating the appearance of morality. Tietjens, upon learning his comrade is ill, thinks, “You don’t contact loathsome diseases except from the cheapest kind of women or through being untidy-minded” (614). In this statement, Tietjens refers to disordered thought in terms of cleanliness, illustrating his belief in the connection between mental “tidiness” and physical health. Logically, a woman like Sylvia with multiple sexual partners is equally likely to transmit a disease as any woman, cheap or not, with an equal amount of partners; the difference is in the perception of her “clean” appearance. Furthermore, Sylvia, one of the novel’s more morally flexible characters, prides herself on her physical fitness, which she equates with beauty and attractiveness: “If [Sylvia] had no other training at her very expensive school she had had so much drilling in calisthenics as to be singularly mistress of limbs, and, in the interests of her beauty she had always kept
herself very fit” (393). Sylvia is often despised by those who know of her immoral behaviors (Vincent Macmaster, Edith Ethel, Mark Tietjens), yet, seen as exceedingly moral and upright by those who are taken in by her charms, like General Campion, and, for a while, Valentine. Within the novel, there is not so much a one-to-one connection between athleticism and morality, as there is between athleticism and self-control, leading to the appearance of morality and propriety. One need not have the self-control to be moral, but one needs self-control to appear moral. The society depicted in this novel is extremely focused on the appearance of propriety (rather than actual propriety), as we see with the characters’ numerous attempts to make their actions appear socially acceptable, including Tietjens’ attempts to cover up his wife’s affairs and his certainty that his son was better off being known to “have a rip of a father than a whore of a mother” (77) as it is more acceptable (though likely equally common) for men to be unreliable and promiscuous than for women to be either.

Tietjens’ character is somewhat contradictory in terms of physical discipline; he is often described as ungainly and even corpulent, but, at the same time, he possesses great physical strength. At his first meeting with Valentine, on the golf course, he runs “like a rhinoceros,” yet is able to outrun all of the other men and keep pace with the exceedingly fit Valentine (much to her surprise) (67). When he is in the trenches, at one point the trench is bombarded, and he must struggle to free one of the men under his command from a pile of debris:

Thank God for my enormous physical strength!’ It was the first time that he had ever had to be thankful for great physical strength. . . . It was a condemnation of a civilisation that he, Tietjens, possessed of enormous physical strength, should never have had to use it before. He looked like a collection of mealsacks; but at least he could tear a pack of cards in half. (638)
Tietjens acknowledges that his physical strength could be of great use to society; he sees it as a waste that he is not better used in this way a member of the lower classes might be.

Yet, physical strength and discipline are not equivalents. Tietjens’ strength does not come from physical training, as it is inherent, treated within the novel as constitutional. And, Tietjens does have a physical weakness, his lungs, and is often regarded as being generally undisciplined, and, consequently, as an anomaly. He is simultaneously strong but awkward, just as he is a master of social propriety, knowing exactly the right thing to say in every situation, but often viewed by others as odd and non-conformist, not having the same goals of monetary success as his peers. Additionally, he is not easily reconciled to the discipline of the army. When considering joining the army, as two of his brothers already have (both are dead), he knows that the type of discipline enforced by the army will not suit him:

But no doubt he would not have liked the army. Discipline! He supposed he would have put up with the discipline: a gentleman had to. Because noblesse oblige: not for fear of consequences… But army officers seemed to him pathetic. They spluttered and roared to make men jump smartly: at the end of apoplectic efforts the men jumped smartly. But there was the end of it. (127)

He sees the power of the officer as only based in appearance. They can control the bodies of the men, but that power, by itself, is hollow. Regardless, Tietjens acknowledges that he must behave with social propriety and obedience to authority, but he displays a strong sense of discomfort with both being controlled and controlling others: “It was detestable to him to be in control of the person of another human being—as detestable as it would have been to be himself a prisoner… that thing he dreaded most in the world…” because, at least, “to control a prisoner even
under the compulsion of discipline on yourself, implies a certain free-will of your own” (619). He equates the instillation of physical discipline by outside forces as control over the will. Thus, he illustrates Foucault’s idea of physical discipline as a means of controlling the human mind and will, a powerful weapon of those in authority. Tietjens is extremely uncomfortable both with using discipline to control and with having discipline used against his own person. If anything, he desires to be complete master of his own mind and body.

Sherston seems to share a similar viewpoint. As his company prepares to go on a raid, he illustrates his willingness to participate, regardless of the danger:

“Anyhow I meant to ask Kinjack to let me go on the Raid. Supposing he ordered me to go on it? How should I feel about it then?” (297). Like Tietjens, Sherston understands the necessity of willingness to fight as well as take orders. But, also similar to Tietjens, Sherston balks at the idea of having his body completely under the control of another person. He would be content to volunteer for the raid, illustrating his ability to overcome his fear of physical danger or death, yet the idea of being under someone else’s control bothers him. Volunteering for the raid is one issue, but being ordered to go is something entirely different. He is not afraid to die or be injured, but he is hesitant to cede control of his will to someone in higher authority.

The submission of the body to discipline is often required of a soldier, and both Tietjens and Sherston are required to follow orders throughout both texts, as is Henry as a medical worker. Up until the point at which Sherston is sent away from the war to rest and begins to question the validity of the war itself, his capacity to be an effective soldier is not questioned. Henry remains cynical about the war
throughout the novel, but because he is not a soldier who must take lives, but rather one who cares for the wounded, his moral position is less dubious. However, he does become exposed to the dark underside of military discipline when he sees the army executing its own soldiers for alleged cowardice and ends up defecting (224-25). The language that Hemingway uses in this section of the text is telling, as he repeats “questioning,” “questioned,” and “questioners” multiple times when describing the “trial” of the accused soldiers. Literally, Hemingway is referring to the interviews with the accused defectors, but his language points more to the sense that these individuals “questioned” the war itself through their hesitancy to participate obediently. As he escapes, Henry reflects that “I was not made to think” (233), but only does so because he knows the opposite to be true; he thinks this only to stop his other thoughts; however, his thoughts are never about the moral validity of his escape, but rather the friends he left behind.

Tietjens proves to be slightly more contradictory in this regard. Though Tietjens is reluctant to submit his body to discipline, he does have some of the characteristics of an excellent soldier, mainly coming from his desire to comply with orders given by those above him hierarchically. Yet, in some ways he is extremely disciplined. For example, in one scene when he is finally asleep after a long, emotionally-exhausting evening, he is able to wake up instantaneously, merely, he thinks, because of the presence of the general: “Immediately upon awakening he was not perfectly certain of where he was, but he had sense enough to answer with coherence the first question the general put to and to stand stiffly on his legs” (444). The narrator comments that it was likely “voices from without” (444) that were
responsible for awakening Tietjens, but his ability to immediately and instinctively produce the appropriate response, before even realizing where he is, indicates his capacity, if not aptitude, for discipline.

Tietjens’ body is adaptable to survival in difficult circumstances although he greatly fears having to go up to the front lines. He grew up wealthy and privileged, but does not require luxury to be content. In this sense he is hardened enough to survive the war, which he does. To his brother Mark, who attempts to give him money, he says, “I loathe your beastly Riviera-palaced, chauffeured, hydraulic-lifted, hot-house aired beastliness of fornication” (218). Tietjens would rather eschew comfort than accept money from a brother who doubts Tietjens’ character. After the war ends and Tietjens returns home, he happily sells nearly all of his possessions in an attempt to begin a new life with Valentine. Merely having the ability to be close to Valentine, for him, supersedes any desire he has for financial or material acquisitions. He will work, as a seller of antique furniture, to support Valentine and the child she is carrying, but requires very little in terms of material comfort. In this sense, he rebels against the capitalistic and materialistic nature of the society of which he is a member, and this puts him at odds with many people who know him, including his brother, leading some, including Edith Ethel, to go so far as to doubt his sanity (504).

**Self-Control**

In *Parade’s End* having control over one’s body, the type of control that allows one to sleep at will or tolerate physically uncomfortable situations, is given great respect by nearly all of the major characters. The same type of value is given to controlling one’s body in Sassoon’s novel. In *Memoirs of an Infantry Officer*, for
instance, Sherston reiterates the importance of being able to control one’s body, and he does so with specific regard to the ability to sleep. By necessity, soldiers either had to sleep in uncomfortable or anxiety-inducing circumstances, or they did not sleep at all. Sherston describes sleeping under conditions most would find unthinkable, with slumbers that “were inured to noises which would have kept us wide awake in civilian life,” either because of physical or psychical discomfort (338).

For example, Sherston writes, “I fell asleep to the sound of heavy firing toward La Boisselle, rattling limbers on the Citadel road, and men shouting and looking for their kits in the dark. There are worse things than falling asleep under a summer sky. One awoke stiff and cold, but with a head miraculously clear” (353). He does not even need a bed to sleep: “As for my flea-bad, it was no hardship; I have never slept more soundly in any bed” (322). In addition to being able to fall asleep to the sound of machine gun fire, some soldiers were able to sleep right before launching an attack, or even while sitting up (341). He refers to a friend named Leake who “had a talent for falling asleep in any position” (426). In this case, Sherston and his fellow soldiers resemble Napoleon, so often praised for his controlled sleep habits.

The self-control expected of Sherston had results surpassing merely the ability to sleep soundly under difficult conditions; it also entailed a great deal of control over one’s emotions, notably fear and anxiety. Elaine Showalter argues that the extremity of the expectation of emotional control essentially disallowed many men to express any feelings at all during the war and even after, effectively rendering them “emotionally incapacitated”:

This parade of emotionally incapacitated men was in itself a shocking contrast to the heroic visions and masculinist fantasies that had
preceded it. The public image of the Great War was one of strong unreflective masculinity. . . . Chief among the values promoted within the male community of the war was the ability to tolerate the appalling filth and stink of the trenches, the relentless noise, and the constant threat of death with stoic good humor, and to allude to it in phlegmatic understatement. Indeed, emotional repression was an essential aspect of the British masculine ideal. (*Female* 169)

British society expected a community of stoic men who could face any trial, life-threatening or otherwise, with serenity or at least its appearance. Unfortunately, the level of detachment needed to tolerate the conditions of the trenches was not conducive to easily returning to a less stoic state after the war; many had to be reconditioned to face and handle difficult or uncomfortable feelings.

Even Sherston struggles with a growing sense of detachment; he is largely able to face his circumstances without complaint (and even with reckless bravery), but he does lose some sense of emotional connectivity with other humans, as displayed when he writes, “And the dead were the dead; this was no time to be pitying them or asking silly questions about their outraged lives. Such sights must be taken for granted, I thought” (435). Shockingly, the sight to which he is referring is “the mask of a human face which had detached itself from the skull” that is “floating on the surface of the flooded trench” (435). He has trained himself not only to face the most horrific conditions without displaying any outward weakness, or arguably feel any inward vulnerability, but also comes to take it “for granted,” as something that is simply a matter of course during the war. That Sherston remains affectively unmoved, or at least tells himself so, from this disturbing vision illustrates that he has experienced a significant degree of desensitization, both to his immediate conditions and his emotional reaction to those conditions. Eventually, he is unable to retain his
stoicism and has himself declared mentally incompetent, but he does regain ability to feel and express emotion and comes to see the war as an outrage though only after he is separate from it. Similarly, Septimus of Mrs. Dalloway has mastered his emotions so completely that he has managed to annihilate them almost completely: “Septimus, far from showing any emotion or recognising that here [at the death of his comrade] was the end of a friendship, congratulated himself upon feeling very little and very reasonably. The War had taught him,” but as a consequence, “he could not feel” (272). When Septimus kills himself, his suicide is not a matter of feeling too much, but of feeling nothing at all.

Like Sherston, Tietjens is displayed making numerous attempts to keep his emotions in check and control his thought processes; at times these efforts are related to his sleep behaviors. In the beginning of the novel, prior to Tietjens’ enlistment, he is already aware (and a great supporter) of the British regard for masculine stoicism: “As Tietjens saw the world, you didn’t ‘talk.’ Perhaps you didn’t even think about how you felt” (6). Even with Macmaster, his closest friend (excepting Valentine later in the novel), Tietjens rarely expresses any emotions over personal issues. Ford writes, “Absurd as it seemed, Macmaster knew that he knew next to nothing of his friend’s feelings. As to them, practically no confidences had passed between them” (15). Tietjens differs from Sherston in that his hesitation to express emotion was not initially a product of coping with war trauma, but instead is rooted in his deep-seated beliefs in social propriety and convention. In Sherston’s case, this convention is taken to an extreme, allowing him to face death and gore without horror.
Despite Tietjens’ ability to show a great deal of restraint when handling personal matters, such as his unstable relationship with his unfaithful wife and questions regarding the paternity of his son and only heir to his father’s estate, he does not display Sherston’s capacity for emotional detachment when faced with that very same death and gore. As Ford writes:

> It has been remarked that the peculiarly English habit of self-suppression in matters of emotions puts the Englishman at a great disadvantage in moments of unusual stresses. In the smaller matters of the general run of life he will be impeccable and not to be moved; but in sudden confrontations of anything but physical dangers he is apt—he is, indeed, almost certain—to go to pieces very badly. (178)

This passage refers to a particularly daunting interview Tietjens must have with his banker, in which he actually does not go to pieces as he fears; however, he does show signs of instability when a fellow soldier to whom Tietjens had previously denied leave, O Nine Morgan, dies in his arms (308).

Immediately after Morgan’s death, Ford depicts Tietjens’ attempts to control emotion. Tietjens must be reminded to wash his hands of Morgan’s blood, as he does not do so on his own (310), suggesting his sense of culpability in Morgan’s death and feelings of responsibility towards his men—feelings that leave him with a sense of powerlessness. To circumnavigate his realization of lack of circumstantial, and even ethical, control, he attempts to assert control over his thoughts by simultaneously working on two tasks, handling matters related to his job, while writing a sonnet in under three minutes upon being given rhymes with which to work. Tietjens is abiding by a “rule” of his: “Never think on the subject of a shock at a moment of shock” (315). Yet, throughout the novel, images of Morgan’s death recur to him, and he is unable to restrain himself from thinking about it. The night of Morgan’s death
is also one instance in which Tietjens wills himself to have insomnia despite physical exhaustion. He decides to devote the night to thinking over his problems with his wife and his potential mistress, Valentine, in large part to avoid thinking about Morgan’s death. He knows how to handle social problems, like those with his wife, so even though his wife has put him in a difficult situation, he is much more comfortable dealing with marital problems than the death of one of his comrades and his sense that he may have somehow been responsible. Tietjens knows that if he settles in to sleep, he will undoubtedly have to confront the horrors of what he had previously witnessed, so his choice of insomnia rather than sleep points to his efforts to prevent thinking on a subject he does not want to confront.

Hemingway’s Henry takes another path towards the mastery of emotion. One effort involves planning his thoughts in way similar to Tietjens. He says, “I was going to try not to think about Catherine except at night before I went to sleep” (166). One of his reasons for doing so is likely the fact that he misses Catherine, but more significantly, his attempts to think of her only before sleep suggest his need to focus his pre-sleep thoughts on something less horrific than the war, implying that letting his mind roam freely would be dangerous to his well being. He also attempts to assert control through relinquishing self-control via the abuse of alcohol. Not a day or night goes by in the novel that fails to include Henry drinking heavily. In fact, as I mentioned earlier, he drinks to the point of jaundice. But, Henry’s drinking often fails him and he finds himself struggling to control his thoughts much as Tietjens and Sherston do. In one such instance, Henry uses insomnia as a means of control:

I watched [the search lights in the sky] for a while and then went to sleep. I slept heavily except once I woke sweating and scared and then
went back to sleep trying to stay outside of my dream. I woke for good long before it was light and heard roosters crowing and stayed on awake until it began to be light. I was tired and once it was really light I went back to sleep again. (88)

At first, he tries to control his dreams to avoid his nightmare, which he never describes. Presumably, this attempt fails and once he reawakens, despite the earliness of the hour, he remains awake. Staying awake in bed, when he could and should be sleeping, is a result of his efforts to keep his unconscious mind in check. This passage contrasts interestingly with the aforementioned passage in which Henry mentions sleeping next to Catherine and knowing the only reason for awakening is her in bed next to him. Once he has left the war, he does not need to control his sleep and can enjoy it freely. However, during the war, sleep entails a great deal of fear over what he may have to confront.

Hemingway’s short story “Now I Lay Me,” is a story about insomnia, which, upon reading, F. Scott Fitzgerald commented, “I thought there was nothing further to be said about insomnia” (“Sleeping” 63). Much as in the way in which Henry from A Farewell to Arms avoids sleep to avoid nightmares, the narrator Nick uses his insomnia for a similar purpose. Nick is in the hospital for an indefinite time (months at least) because he “had been blown up at night” (“Now” 276). He describes himself as someone who has “practice at being awake” (“Now” 279), and does so through recounting memories of his past and reciting prayers. He refuses to allow himself to sleep at night: “I myself did not want to sleep because I had been living a long time with the knowledge that if I ever shut my eyes in the dark and let myself go, my soul would go out of my body” (“Now” 276). For Nick, sleep must be conquered because sleep involves a horrific confrontation with his mind that he cannot endure. He fears
that when asleep, he will lose himself completely, likely because he felt that he had already lost himself to the war. Being awake and controlling his sleep is his only means of retaining self-control.

**The Function of the Binary**

Evidence of this tension between self-control and discipline comes through the textual treatment of insomnia and sleep, which, as the texts depict cannot be treated as a simple binary, one such as sleeping and waking, because of the complexity of the relationship between mind and body in the experience of insomnia. As I noted in my introductory chapter, Fussell argues that one of the outcomes of World War I in relation to the use of language and production of literature was a tendency towards representing war experience and post-war experience through binary language. An interesting example of Fussell’s theory is present within *A Farewell to Arms* with Hemingway’s depiction of the binary between night and day as perceived early in the text by Henry. Towards the beginning of the novel, Henry notes his inability to express this binary completely:

I had gone to no such place [as Abruzzi] but to the smoke of cafés and nights when the room whirled and you needed to look at the wall to make it stop, nights in bed, drunk, when you knew that that was all there was, and the strange excitement of waking and not knowing who it was with you, and the world all unreal in the dark and so exciting that you must resume again unknowing and not caring in the night, sure that this was all and all and all and not caring. Suddenly to care very much and to sleep to wake with it sometimes morning and all that had been there gone and everything sharp and hard and clear and sometimes a dispute about the cost. Sometimes still pleasant and fond and warm and breakfast and lunch. Sometimes all niceness gone and glad to get out on the street but always another day starting and then another night. I tried to tell about the night and the difference between the night and the day and how the night was better unless the day was very clean and cold and I could not tell it; as I cannot tell it now. But if you have had it you know. (13)
This passage, which describes Henry’s wartime experience of regular drunken visits to brothels, both relies upon binary notions of day and night and confuses these binaries, illustrating the narrator’s tendency to resort to such binaries, but also their failure to express his experience. He asserts that drunken nights can seem like the time when “you knew that that was all there was,” yet, simultaneously, “you must resume again unknowing and not caring in the night.” He distinguishes the drunken blurriness of the night with the “sharp and hard and clear” morning, yet refuses to posit that the morning is a time of renewed stability, as one might face a “dispute” over the costs of a prostitute’s services or experience the “excitement” of waking in bed next to a new stranger each day. The passage suggests that what makes the night knowable is its relationship to chaos and confusion; during war, chaos and confusion are really all one can be certain of. The day seems clearer in the sharpness and hardness of its appearance, but it fails to prevent another confusing and chaotic night. Day only seems to provide honesty and clarity, but night, in its mystery is more revealing and truthful but only of more mystery and confusion. Henry’s conclusion that he cannot express the true distinction between night and day, though he knows one exists, illustrates the circular, rather than linear model of the binary structure. As Henry contends, there is “always another day staring and then another night,” suggesting that the two are not opposites, but simply different parts of the same cycle of confusion, one leading to the next and so forth.

Later on in the novel, however, as Henry’s experience in the war continues, and he is both wounded in a shelling and witness to the death of his comrades, his sense of distinction between night and day stabilizes: “I know that the night is not the
same as the day: that all things are different, that the things of the night cannot be
explained in the day, because they do not exist, and the night can be a dreadful time
for lonely people once their loneliness has started” (249). Night and day have
regained their binary distinction, but only because of their incompatibility. The night,
the time at which he was most active as a war worker or as a pursuer of distraction,
becomes the inexpressible other to the more familiar and less isolating daytime.

While Henry asserts that the night is lonely for most, his nights are not lonely
at all. Much of his life with Catherine takes place at night; the war has turned him
into a complete insomniac. After he is hospitalized for his injuries, as the result of a
circumstantial coincidence, Catherine is transferred to his hospital and takes a job on
the night shift. Her desire to work on the night shift is motivated through her desire
to be with Henry, as night is the only time they can be alone. Hemingway writes:

Catherine Barkley was greatly liked by the nurses because she would
do night duty indefinitely. She had quite a little work with the malaria
people, the boy who had unscrewed the nose-cap was a friend of ours
and never rang at night, unless it was necessary but between the times
of working we were together. I loved her very much and she loved
me. I slept in the daytime. . . (108)

Thus, though the level of intimacy that their relationship reaches is forbidden because
they are not married, Henry asserts self-control, rather than discipline, through
maintaining his nocturnal connection with Catherine. He disregards hospital
procedure, allowing Catherine into his room socially, but can only do so because he is
able to sustain his insomnia. His insomnia allows him to pursue individual interests.

Hemingway further emphasizes the nocturnal nature of Henry’s relationship
with Catherine through making the significant actions of their relationship take place
nocturnally. For instance, they first visit each other at night, when Catherine is off
duty (before her transfer and Henry’s injury). More significantly, their first public liaison as a “married” couple (they claim to be married to a hotel manager and to themselves, but are not legally married) takes place on the night before Henry’s return to service. They remain in a hotel together as a couple until Henry must take the midnight train back to the front (147). They leave Italy at night as well, escaping to Switzerland in the dark (291). Additionally, Catherine goes into labor with their child at three in the morning (313). Every action Henry takes to pursue his own self-interests, as opposed to national interests in the war, takes place at night.

Anxiety

The constant confrontation of trauma or the ubiquitous possibility of traumatic events, in turn, creates a sense of anxiety in many characters within both novels. Anxiety is often cited as one of the most prevalent causes of insomnia, and a feeling displayed by many characters throughout both texts, not only in relation to World War I, but also in relation to modernity itself. Both Eluned Summers-Bremner and Ford, argue that modernity, especially with its related urbanization and effects of that urbanization such as crime and noise, creates anxiety, which then causes insomnia. For Summers-Bremner, when a village grows, it becomes a city, but a city can grow indefinitely, seemingly infinitely, much as “sleeplessness causes thought to feel unstoppable” (111); similar to the way in which a citizen may feel that urban sprawl has grown out of his or her control, the insomniac may feel his or her stream of thoughts is beyond control and ever multiplying. According to Christina Britzolakis, Ford understood modern cities in much the same way as Summers-Bremner. Ford viewed modernity as an excess of stimuli “caused by urbanization and by the various
technological and social changes that accompany it” (3). Consequently, modernity and “metropolitan identity” were closely related. Ford viewed modernity itself as a form of trauma, and, because he saw “metropolitan identity” as an essential element of the life of the modern individual, survival in the modernized world must be “an affair of anesthesia, of defensive non-sensitivity to an otherwise overwhelming burden of stimuli” (4). Ford’s sense of the overstimulation of urban modernity is similar to that of Georg Simmel, who describes the modern urban experience:

The psychological basis of the metropolitan type of individuality consists in the intensification of nervous stimulation which results from the swift and uninterrupted change of outer and inner stimuli. Man is a differentiating creature. His mind is stimulated by the difference between a momentary impression and the one which preceded it. Lasting impressions, impressions which differ only slightly from one another, impressions which take a regular and habitual course and show regular and habitual contrasts—all these use up, so to speak, less consciousness than does the rapid crowding of changing images, the sharp discontinuity in the grasp of a single glance, and the unexpectedness of onrushing impressions. These are the psychological conditions which the metropolis creates. (409)

Much as William James asserts that a reliance on habit, grounded in familiarity, prevents exhaustion by allowing us to minimize the amount of conscious attention we focus on a given habitual behavior ( Habit 40), Simmel argues that the increased unfamiliarity of the urban setting due to its amorphous nature creates mental exhaustion through the over-exertion needed to perceive and interpret surroundings.

The trench system of World War I that the soldiers inhabited mirrored the over-stimulation and chaos of the urban setting. As Fussell notes, trenches were given decidedly urban names: “a less formal way of identifying sections of trench was by place of street name with a distinctly London flavor. Piccadilly was a favorite; popular names also were Regent Street and Strand; junctions were Hyde
Park Corner and Marble Arch” (42-43). However, the likeness does not stop simply at urban-themed assignations. Fussell presents a description of the trenches, illustrating their similarity to an urban setting: “To be in the trenches was to experience an unreal, unforgettable enclosure and constraint, as well as a sense of being unoriented and lost. One saw two things only: the walls of an unlocalized, undifferentiated earth and the sky above” (51). He then recounts the experience of a World War I vet, wandering through a city in India, whose experience of being lost in back alleys makes him feel as though he had returned to the trenches (51).

In Fussell’s description of the trenches, the monotony of the landscape is certainly not reminiscent of the ever-changing and over-stimulating world Simmel describes. But even then, one can imagine a shelling or explosion to create both sensory overload and a malleable landscape. The sense of entrapment, chaos, claustrophobia, and disorientation Fussell illustrates further resembles the urban experience as described by Simmel as one in which the individual feels lost and isolated amidst a crowd. One can imagine that in an urban landscape, the only view of the natural world is the sky; because the person is hemmed in by buildings on all sides, the only escape from this view is upwards. The trenches elicit a similar experience. Fussell argues, “It was the sight of the sky, almost alone, that had the power to persuade a man that he was not already lost in a common grave” (51).

Both the trenches of World War I and the urban cityscape are products of modernization and can have the paradoxical consequence of de-sensitization through repeated over-stimulation. Britzolakis argues that for “Ford, metropolitan anesthesia is a function of a culture marked by ever more highly developed powers of mass
communication and technological destruction alike” (15). This belief translates into a form of “impressionism” in his writing, in which vision itself is the vehicle of both attempt and failure to understand the modern world. Within Parade’s End, Ford’s outlook is arguably translated in the form of the visual illusions that Tietjens experiences when he has not been able to sleep, so becomes intrinsically connected to Tietjens’ insomnia: “His eyes, when they were tired, had that trick of reproducing images on their retinas with that extreme clearness, images sometimes of things he thought of, sometimes of things merely at the back of his mind” (299). During the scene from which the above quotation is taken, Tietjens is mulling over problems with his wife but also the human tragedy of war itself, and it is a reproduction of his wife’s image that he sees before him, but he is also trying to comprehend the world around him, indicating that these retinal illusions are his means of adjusting to and understanding the world of his experience.

During this scene, Tietjens is introduced to Captain McKechnie (whom he mistakenly thinks of as McKenzie for quite some time). McKechnie is assigned to Tietjens’ unit because McKechnie has been showing symptoms of war neurosis, yet, as Macmaster’s nephew, McKechnie is a person to be protected and not disgraced for his mental illness. Tietjens’ unit is well behind the front lines, and Tietjens can act as sort of baby-sitter to McKechnie while he “recovers.” Just prior to his conversation with McKechnie, Tietjens contemplates the true tragedy of the war:

Heavy depression settled down more heavily upon him. The distrust of the home Cabinet, felt by then by the greater part of that army, became physical pain. These immense sacrifices, this ocean of mental sufferings, were all undergone to further the private vanities of men who amidst these hugenesses of landscapes and forces appeared
pigmies! It was the worries of all these wet millions in mud-brown that worried him. (297)

There is a parallel here between Tietjens’ sense of the war as out of control (especially his control) as viewed through a huge and ever expanding landscape and that same lack of control felt by those experiencing a seemingly infinite increase in modernity and urbanization. His use of natural imagery, including vast landscapes, oceans, and mud associated with the masses of suffering soldiers, emphasizes the disconnection between the more natural world of the men and their individual worries and the modernized, dehumanizing world of the military authorities. The vastness of the war landscape, similar to ever-expanding cities that dwarf their inhabitants, associates the expansiveness of modernization with the horrors of war.

As Tietjens converses with McKechnie, McKechnie raises the subject of Sylvia. Tietjens, who went to war at least in part to remove himself from the problems of his home life, is overwhelmed by the painful effect the mere mention of Sylvia’s name has on him: “In the dark brownness, an intolerable pang went all through his heavy frame—the intolerable pang of home news to these desperately occupied men, the pain caused by disasters happening in the darkness and at a distance” (299). Again, Tietjens is struggling with a lack of control that he equates to spatial expansiveness. He is mostly unable to affect circumstances at home given his separation from his wife and family. His mind’s tendency to reproduce images on his retinas can be seen as a reaction to a sense of being out of control and the subsequent anxiety that state creates.

Tietjens is a decidedly pre-modern character, often referred to as being of the eighteenth century. It is no coincidence that in his moments of exhaustion, when
experiencing visual illusions, Tietjens often sees “a woman in an eighteenth century dress looking into a drawer in his bureau” (418). When he is exhausted or feels as though life is out of his control, his mind’s reaction is to focus itself on a scene from which he takes comfort. Ford identified Tietjens as a man “whose body is tied in one place, but whose mind and personality brood eternally over another distant locality” (qtd. in Gose 446). This brooding is often a product of anxiety, from which Tietjens certainly suffers, but his anxiety more related to “instrumentalizing relations,” or his innate opposition to “the shaping of human will to the designs of technical administration,” (McCarthy 178-79) as opposed to fear of pain or suffering, fear of not sleeping itself, or failure to live salubriously. According to Jameson, “modernism . . . involves a whole Utopian compensation for increasing dehumanization on the level of daily life” (42). Tietjens’ orientation towards the past in moments of rebellion against the modern world illustrates his frustration with the dehumanization he witnesses. Ford’s inclusion of this tendency within the text serves to illustrate Tietjens’ utopian inclinations (he sees the eighteenth century as an idealized era in which interpersonal relationships take precedence over rationalized ones) in direct response to not Modernism, but modernity.

When Tietjens is unable to sleep, it is primarily because he is concerned with interpersonal relationships, mainly those between himself and his wife or himself and his future mistress (243; 348). In many ways, modernity diminished the practical necessity of interpersonal relations, through increased bureaucracy, rationalization, mass production, mechanical warfare and countless other factors. Tietjens, however, focuses his mental energy not on solving problems of productivity, but of working out
situations of interpersonal communication and conflict, differentiating himself from his modern counterparts. Tietjens does believe that “it is proper that one’s individual feelings should be sacrificed to the necessities of a collective entity” (357), as is evidenced by his various attempts to control his thought processes. However, unlike Sherston, Tietjens is not able to detach himself from interpersonal feelings and emotions, resulting in a unique type of anxiety from which Tietjens both suffers and is kept awake at night.

An example of this social anxiety comes when Tietjens’ wife, Sylvia, decides to visit him at the front after he believes they had been permanently parted, never to interact as husband and wife again. Rather than choosing to sleep after an exhausting day, Tietjens, “had appointed this moment of physical ease that usually followed on his splurging heavily down on to his creaking camp-bed in the doctor’s tent hut, for the cool consideration of his relations with his wife” (342). This is a scene in which Tietjens chooses insomnia, deciding to use his “insomniac-time” as time for thought, as he forces himself to write down the story of his recent history with his wife. However, his marital difficulties are not all that are keeping him awake. This scene takes place subsequent to the death of O Nine Morgan, and visions of Morgan’s death continue to occupy his thoughts, against his will. He fails to come to any definite conclusions regarding his relationship with Sylvia, as he finds it difficult to concentrate on her and not on the trauma he suffered with Morgan’s death.

As thoughts of Morgan overtake his mind, he begins to equate his exhaustion, and even sleep itself, with death:

And at the thought of the man [Morgan] as he was alive and of him now, dead, an immense blackness descended all over Tietjens. He said
to himself: *I am very tired*. Yet he was not ashamed…. It was the blackness that descends on you when you think of your dead… It comes, at any time, over the brightness of sunlight, in the grey of evening, in the grey of the dawn, at mess, on parade; it comes at the thought of one man or at the thought of half a battalion that you have seen, stretched out, under sheeting, the noses making little pimples; or not stretched out, lying face downwards, half buried. Or at the thought of the dead that you have never seen dead at all…. Suddenly, the light goes out… (356)

In this passage, Tietjens is overtly discussing the horrors of mortality, especially for those left alive in the war, but his arguments about thoughts of horror parallel the result of exhaustion and the impending need for sleep. He is considering a lack of control over thoughts, thoughts that come on a person seemingly randomly, much as insomnia in large part implies a lack of control over sleep. Insomnia itself mimics the condition of human mortality, death being the ultimate form of isolation from communication with the rest of humanity. Sherston, for example, sees soldiers and “was doubtful whether they were asleep or dead, for the attitudes of many were like death, grotesque and distorted” (431). It is their isolation, their attitude of being cut off from the rest of humanity, that Sherston finds grotesque. Sherston asks, “And the soldiers who slept around us in their hundreds—were they not like the dead, among whom in some dim region where time survived in ghostly remembrances, we two could still cheat ourselves with hopes and forecasts of a future exempt from antagonisms and perplexities?” (358). We live our lives not knowing with any certainty when death will come, yet with awareness of our own mortality, just as the insomniac suffers from a heightened awareness of time’s passage, yet lacks knowledge of sleep’s arrival. One who cannot sleep is also unable to capture the freedom from consciousness brought on by both sleep and death. Standardized Time
and Taylorization sought to eliminate idiosyncrasy of time, as did the 1914 institution of Daylight Savings Time meant to lengthen the amount of daylight one experienced and save fuel (Coren 270); insomnia reclaims this idiosyncrasy because the sleepless individual gains a heightened awareness of time, yet also a heightened awareness of his or her lack of control over it. This same idiosyncrasy reflected the idiosyncrasy of war and its disruptive effects on biological rhythms.

Tietjens is kept awake by worrying not about himself, but about others in his life, whether they are comrades in the war or friends and family. Similarly, he is not the only one kept awake by anxiety, though his anxiety takes on a unique form based in interpersonal relations. Sherston, too, suffers from anxiety, which, even in spite of his aforementioned adaptability to uncomfortable circumstances, makes it difficult for him to sleep. In this case, insomnia was almost expected from the soldiers, as Sherston’s comrade Dottrell observes, “[The soldiers] must suffer terribly from insomnia with so many guns firing fifteen miles away” (351). After Sherston returns from Army School, he learns of an impending raid on the enemy trenches. As a consequence of this information, he is kept awake. He writes, “I was now full of information about the Raid, and I could think of nothing else. My month of rest at Flixécourt was already obliterated” (296). He had been away from the front lines prior to this point, and, consequently, he was able to rest. However, his return to the front and the subsequent anxiety it caused had the effect of erasing all the benefits of his rest. Sherston continues, “I wouldn’t mind going up there and doing it now, I thought, for I was wideawake and full of energy after my easy life at the Army School” (297). Sherston implies that the time he is spending not sleeping is time
wasted in this case. He would rather take action, though that action entails a great degree of physical danger, than spend time in anxious limbo, merely waiting to act. He would prefer a state of combat to the state of anxiety preceding combat, this anxiety creating a state of insomnia.

Though Tietjens and Sherston were both active in the war, soldiers and other war workers were not the only people to suffer from insomnia related to the war and its anxieties. In *Parade’s End*, both Sylvia and Valentine acknowledge being unable to sleep at night due to their concern for Tietjens and the war itself. Valentine, for instance, exclaims, “I can’t sleep….never….I haven’t slept a whole night since…Think of the immense spaces, stretching out under the night…I believe pain and fear must be worse at night” (234). And, Sylvia says, “I’m dog-tired…. I haven’t slept for six nights…. In spite of drugs” (443). Valentine and Sylvia, despite their shared insomnia, are to be differentiated here. Valentine’s insomnia is similar to Tietjens’ in that one of its causes is the horror of war itself; she is not concerned for herself, and, while she is concerned for Tietjens’ safety, she is more focused on the general suffering of all involved with the war. She mentions “immense spaces,” echoing the Tietjens’ anxiety over the “hugenesses of landscapes” (297) and also Ford’s concerns over the uncontrollable expansion of urbanity that comes with modernization. Sylvia, on the other hand, is more selfish. Her insomnia stems from a lack of control, but this lack of control is not due to the suffering and seeming infinite nature of the war, but over her inability to control Tietjens himself. He is no longer under her power, so she is kept awake by thoughts of how to regain some sort of mastery over him.
Furthermore, Valentine, like Tietjens, is willing to stay awake with her thoughts, but Sylvia uses drugs in an attempt to sleep.

Whatever form the cause of anxiety contributing to insomnia may take, civilian insomnia was not uncommon during the war. In fact, some civilians suffered from not only just insomnia, but also neurosis, similar to the “shell-shock” experienced by soldiers. Initially, medical authorities did not believe civilians could suffer from neurosis caused by war-related anxiety; however, through imagining the horrors of the war, many civilians did indeed become susceptible to suffering, and the condition gained public recognition, skeptical as that recognition may have been (Tate 11-12). Insomnia became one of the more frequently visible symptoms of civilian suffering. Because civilians did not directly experience combat or even threats of physical danger, neurosis was largely related to stress associated with loved ones more directly involved in the war, complicating an understanding of it as related to neurotic responses resulting from more direct threats like bombings or air raids.

Therefore, it stands to reason that the cure for insomnia and disturbed sleep often involved establishing control over both one’s thoughts and one’s environment. Mastery of the body and mind was the primary area of focus in the discussion of the treatment of insomnia, but medical experts provided practical advice as well. Drugs were not the preferred method of treatment in the years following the war, but could be used as a method of last resort (“Broken Sleep” Rankin 78). However, with or without sedatives, one should have a place to sleep that is “dark, quiet, and well-ventilated. A spring bed was best, and it should be placed away from the wall” (Hutchinson 777).

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Ford gives an example of attempts at environmental control in order to alleviate insomnia. Tietjens, after the war, arranges his bedroom in a manner conducive to sleep. Ford relates Valentine’s thoughts upon seeing how Tietjens has arranged his room:

“These things looked terribly sordid and forlorn. Why did he place them in the centre of the room? Why not against a wall? It is usual to stand the head of a bed against a wall when there is no support for the pillows. Then the pillows do not slip off. She would change… No, she would not. He had put the bed in the centre of the room because he did not want it to touch walls that had been brushed by the dress of [Sylvia Tietjens]. (651)

This passage gives Valentine’s interpretation of the arrangement of Tietjens’ room; Tietjens himself provides no explanation. Yet, her analysis makes sense. Earlier in the novel, we learn that Sylvia, Tietjens’ estranged wife, is a major cause of his insomnia, or at least it is mainly of her and their problems that he thinks when he is up late at night (Ford 79). Tietjens is doubling Hutchinson’s brand of advice: he has both placed his bed away from the wall and attempted, by doing so, to separate himself from the cause of his insomnia. He has attempted to master his environment in order to master his thoughts.

**Fallout of Insomnia**

The consequences of insomnia for the individual may include exhaustion, decreased alertness and productivity, but the consequences of insomnia for the larger group are arguably revelatory of the stability of the society itself as well as the relationship of the individual to the larger group. In his book *The Rationalisation of Slaughter*, Daniel Pick raises a crucial issue: “The sense of crisis aroused by shell shock owed a great deal to the expectations of manliness fostered by the war
propagandists and to the wider presumption that mental illness was an index to the moral state of the nation—as though the sum of individual physical and psychological conditions formed a collective mind and body” (243). Pick, much like the medical authorities seeking to prevent insomnia, illustrates the alleged relationship between mental health and morality (though he does not take this relationship for granted). He points to the idea of “individual physical and psychological conditions” (which can certainly include insomnia) as more than just a reflection on the individual sufferer, but on the society itself. If British authorities choose to point to lesser proportion of incidences of shell shock as proof of the superior strength of their psyche, then it is arguable that the cases that do exist point to cracks in that social armor.

It was then very much in the interest of authorities to emphasize the individual’s personality or circumstances, rather than the society, as the impetus of the insomnia. A useful parallel here may be drawn between insomnia and shell shock. Lerner uses the actions of post-war German medical community to illustrate the extent to which “science” molded itself to serve the needs of government and industry. One important generalization Lerner makes about the shift in psychiatric discourse regards the discipline’s widespread acceptance of the view that “traumatic events do not make healthy people sick, but rather sick people react pathologically to traumatic events” (15). This mentality is not exclusive to the German medical industry. An article written by several unnamed British doctors gives the following explanation of war neurosis:

It is maintained that the nervous breakdown, which is a common sequel of participation in battles of to-day, is practically confined to persons who are already subject to nervous instability, or in other words, that the strain of modern warfare is merely an exciting cause of
“nerve shock,” and that many of the sufferers would, under ordinary circumstances, have broken down sooner or later. (“Nerve Shock” 64)

Findings seem to indicate that the various symptoms of neurasthenia, including unconsciousness, amnesia, and aphasia, are not due to external conditions alone, but rather the patient’s “pre-morbid personality,” which is more worthy of examination than his or her actual trauma (“Nerve Shock” 64). Not surprisingly, treatments were similarly self-serving for the government.

Mental breakdowns of soldiers resulting from war trauma were largely viewed in the same light as industrial accidents, and insomnia was one of the indicators of mental breakdown. Many treatments were designed not to allow the patient to reprocess his or her experience as cognitive and psychoanalytic models of treatment propose, but to influence the will towards “patriotism, altruism, and productivity” (Lerner 23). This notion is exemplified by the rejection and marginalization of theories of Doctor Hermann Oppenheim who suggested war trauma was the true culprit for veterans’ conditions such as stuttering, shaking, and mutism (Lerner 16). Oppenheim’s theories were rejected for what amounted to economic reasons; if the war was to blame for the soldier’s illness, the state was morally and financially responsible for his cure. Thus Oppenheim’s assertion that the war caused the illness was seen as “scientifically false, but perhaps more importantly, disastrous ‘for the economic interest of the state and the health of the individual’” (Lerner 16-17). Not all doctors and psychologists agreed on this subject. W. H. R. Rivers, for instance, argues that many soldiers repressed their war experience rather than confronting it outright, but this repression did not necessarily indicate mental illness on its own: “repression is not in itself a pathological process, nor is it necessarily the cause of
pathological states” (1). For Rivers, the need to repress is not indicative of pathology, but may become pathological during “times of special stress” at which “these failures of adaptation are especially liable to occur” (1). Notably, Rivers emphasizes the external causes of the failure of the repressive mechanism rather than individual weakness. He does not blame the soldier for his neurosis, but rather the soldier’s stress. Even so, his considerations of treatment are not limited to the benefit of the soldier: “When treating officers or men suffering from war neurosis we have not only to think of the restoration of the patient to health; we have also to consider the question of fitness for military service” (10). Not necessarily an advocate of treatment through discipline like other medical professionals I have already mentioned, his concerns in sending back the soldier are not in the soldier’s interests alone; sending a soldier back prematurely “might have produced some disaster by failure in a critical situation or lowered morale of his unit by committing suicide” (10). Despite his refusal to blame the individual for his own trauma, Rivers’ priorities of treatment remain focused on the best interests of the military as a whole.

Yet, doctors like Oppenheim and Rivers were more the exception than the rule, at least initially. For example, an article describing the “soldier’s heart” or “the irritable heart of soldiers” explains that “This strain (of war experience) inevitably finds out the impaired hearts” (Mackenzie 117). Even though this article is talking about an ostensibly physical ailment, albeit one “to which soldiers are particularly liable” (117) rather than a psychological one, the language is telling, indicating that the war does not cause weakness, in this case heart trouble, but reveals it. Although insomnia and shell shock are different conditions, the discursive treatment of these
issues is generally the same. If the individual is implicated in his or her own insomnia, the individual, rather than the society, must take responsibility for the consequences of that insomnia. Within the novels, we see various approaches to the consequences of suffering from insomnia or choosing not to sleep at night.

In *Parade’s End*, there are a few occasions on which Tietjens goes without sleep. After one particular occurrence, he becomes unusually forgetful: “He had not been on the back of the animal two minutes before he remembered that he had forgotten to look it over. It was the first time in his life that he had ever forgotten to look . . . before climbing into the saddle” (363). He expects that riding the horse will help him become more awake and aware, “But the ride did not clear his head—rather the sleeplessness of the night began for the first time then to tell on him after a morning of fatigues” (364). Later on, Tietjens becomes dizzy, and the hut he is in is “reeling a little” (450). Other characters try to come to Tietjens’ rescue, McKechnie providing him with hot cocoa (364) and Levin providing him with smelling salts (450). The willingness of others to help remedy Tietjens’ exhaustion shows the nature of their co-dependence and the necessity of Tietjens acting alert and awake despite having been unable to sleep. Yet, Tietjens shows little concern with the consequences of his own insomnia, emphasizing both his refusal to prioritize himself as a soldier in terms of his self care, but also the extent of his masculinity, as Sylvia compares him to her lover, Perowne, in the following manner: “He would not do anything to a girl like you. He’s a man…” (381). Later, she gives herself ten minutes to find a man comparable to Christopher in a room full of soldiers, but finds herself unable to do so (415). Tietjens’ manliness extends to his ability to stay awake all
night without complaint: “It was the day after he had been up all night because the
draft had been countermanded…. It didn’t matter” (448). Tietjens does not express
any concern over his ability to do his job after an extended period of sleeplessness.
His focus is his relationship with his wife. When he is offered the aforementioned
smelling salts to help him become more alert, he does not comment on their effect,
but on how they remind him of his wife (448).

For Sherston, lack of sleep also has various effects, certainly not limited to
exhaustion. As a result of his insomnia, Sherston has a difficult time retaining mental
focus consistently. Sassoon writes, “During the next two days my mind groped and
worried around the same purgatorial limbo so incessantly that the whole business
began to seem unreal and distorted. Sometimes the wording of my thoughts became
incoherent and even nonsensical. At other times I saw everything with the haggard
clarity of insomnia” (508). Two particularly interesting ideas are implicit within
Sherston’s observation. In one sense, the lack of sleep lessens Sherston’s ability to
control and even understand his own thoughts, much as we see with Tietjens who
suffers from hallucinations when he is tired. Alternatively, and perhaps because of
the additional time for thought afforded to him by his inability to sleep, he sees with a
sense of clarity. “Haggard” implies exhaustion, but he knows there is some truth to
what he sees through the lens of this exhaustion; it is as if the world comes to him
unfiltered and he can gain a new sense of reality and understanding.

However, there are occurrences in which Sherston’s exhaustion does have
definite repercussions in terms of his ability to perceive reality and to function
interpersonally. In one scene, Sherston is stumbling around in the dark trenches:
Once, when I tripped and recovered myself by grabbing the wall, my tentative patch of brightness revealed somebody half hidden under a blanket. Not a very clever spot to be taking a nap, I thought as I stooped to shake him by the shoulder. He refused to wake up, so I gave him a kick. “God blast you, where’s Battalion Headquarters?” My nerves were on edge; and what right had he to be having a good sleep, when I never seemed to get five minutes’ rest?... Then my beam settled on the livid face of a dead German whose fingers still clutched the blackened gash on his neck. . . . Stumbling on, I could only mutter to myself that this was really a bit too thick. (That, however, was an exaggeration; there is nothing remarkable about a dead body in a European war, or a squashed beetle in a cellar.) (437)

Sherston’s jealousy of one who is sleeping takes some prominence in this passage. He does not sympathize with the soldier whom he thinks to be asleep (and perhaps even share his sense of exhaustion); rather, Sherston resents the soldier’s “nap” and kicks him in an effort to awaken him, even as Sherston believes this soldier to be a comrade. Upon realizing the soldier is not actually sleeping, but dead, Sherston still expresses no sense of pity, sympathy, or empathy. Instead, he likens the dead man to a squashed beetle, robbing him of their shared humanity (albeit somewhat understandably, as undoubtedly the German soldier’s intention in the trench was to kill as many British soldiers as possible). Sherston points to the soldier’s hands, “clutching the blackened gash on his neck,” which seems to humanize the German, illustrating that he died with pain and fear, making him worthy of the reader’s pity, yet Sherston quickly disrupts this moment of humanization by declaring the site of the body to be “nothing remarkable” comparable to a “squashed beetle in a cellar.”

This passage reveals an inadvertent effect of insomnia (and of the war itself) in that the soldiers are desensitized to each others’ humanity and also the tragic nature of death and destruction on such a mass scale. The clarity that Sherston attains both reveals to him the dehumanizing effects of war, yet makes him apathetic as well.
Towards the end of the text just before his committal Sherston argues that insomnia can provide clarity, but prior to this observation clarity for him in the previous scene is akin to likening a dead human to a dead insect, providing an instance of the devaluation of the life of the individual. Death is inevitable and unremarkable. He has come to understand the hardness of the life he is forced to live during the war, but to be able to cope with this hardness is to renounce humanity to an extent without even realizing, at least at the time, that he is doing so. Others, like Sigmund Freud, counter that sleep, rather than insomnia, is needed for understanding of the self. Time spent sleeping is considered important for reasons other than physical and mental productivity or alertness, but also purposes of insight. Some, like both of Hemingway’s lieutenants, choose to avoid sleep at night to avoid the insight it might provide, but arguably to their own detriment. Freud, whose theories of psychology were particularly influential to the society represented in the novels, for example, views the state of sleep as necessary to gain a greater understanding of ourselves, our desires, and our fears; consequently, to avoid sleep means to avoid a confrontation with them. When we are awake, Freud argues, our conscious mind acts as a censor, allowing us to pursue some thoughts, while suppressing others. On the other hand, as we fall asleep, “the ‘undesired ideas’ emerge, owing to a slackening of a certain arbitrary (and, of course, also critical) action, which is allowed to influence the trend of our ideas” (Dreams 193). The state leading up to sleep allows our minds to operate without conscious or even subconscious restriction, bringing to the surface thoughts we normally exclude from our internal monologues. When one is able to suppress self-criticism, “an unlimited number of thoughts enter his consciousness
which would otherwise have eluded his grasp. With the aid of material thus obtained—material which is new to the self-observer—it is possible to achieve the interpretation of pathological ideas” (Dreams 192). One has to be able to sleep to rid oneself of pathology, so to not sleep might be a means of self-punishment through maintaining and perpetuating pathology. Such an argument makes sense in light of the guilt Tietjens feels regarding Morgan’s death, Sherston feels regarding his participation in the war, and Henry might feel for his various moral transgressions. Their insomnia simultaneously prevents them from confronting the nightmares they may have, yet through preventing this confrontation, allows them to prolong their guilt and self-punishment.

For Freud, dreaming, which primarily takes place when one sleeps, is also necessary to gain self-awareness, especially in cases of malady or neurosis because clues to the workings of the psyche lie within dreams. He writes, “The theme to which [the dreams of the neurotic] point is, of course, always the history of the malady that is responsible for the neurosis” (Dreams 194). Dreams were necessary for non-neurotics as well, as they were forms of “wish-fulfillment,” leading people, through psychoanalysis, to better understandings of themselves and their, sometimes hidden, desires (Dreams 208). So, in addition to sleep being necessary for physical health, it is also necessary for psychological health.

Again, Tietjens presents an interesting application of Freud’s ideas. There is one scene in particular in which Tietjens talks in his sleep, giving prominence to issues with which he is contemplating, if only subconsciously (453). Tietjens is not surprised that he has been talking in his sleep, claiming, “It’s nothing to write home
about! With the overwork I’ve had and the sleeplessness…” (453). In this instance, he echoes MacFarlane, acknowledging overwork as a cause for his inability to sleep and poor sleep quality. He explains his sleep-talking when he says, “It means that one has been under mental pressure, but all mental pressure does not drive you over the edge” (453). His mental pressure had a necessary outlet in his sleep-talking, allowing him to do something which Levin characterizes as indicating that one is “a bit dotty” (453), but is ultimately able to retain his sanity. Tietjens’ awareness of great mental pressure supports Freud’s argument that dreaming provides an outlet for difficult emotions. When he does sleep, his anxieties are given visual expression.

Further bolstering Freud’s theories is the actual content of Tietjens’ sleep talk. Freud, as previously mentioned, believes that the content of dreams points to the cause of mental suffering; he further argues that sleep allows the sufferer to have thoughts that he or she would normally suppress during waking hours. Both elements of Freud’s argument prove true in Tietjens’ case. Tietjens, who cannot remember what he said while sleeping, asks Levin, who answers, “You were talking to a young lady about matters you don’t generally talk to young ladies about…. And obviously you were trying to let your…. Mrs. Tietjens, down easily…. You were trying to explain also why you had definitely decided to separate from Mrs. Tietjens…. And you took it that the young lady might be troubled….at the separation…. ” (458-59).

To this point, Tietjens has consciously thought very little about Valentine, considering the impossibility of making her his mistress while he is away at war, primarily due to fear of impregnating her then dying and being consequently unable to care for her and the child, who would be a bastard. Both sleep and trauma return
thoughts of her to his mind: “He had not thought of that girl [Valentine] for over a fortnight now . . . She was certainly now obsessing him” (604). However, even in sleep, he refers to her as “Miss Wannop,” illustrating the deeply ingrained nature of his social values and sense of propriety. Yet, his dreams reveal his feelings towards her and his wife, even if he is hesitant to acknowledge them himself. Prior to this point, Tietjens maintained that divorce should not be requested by a man, arguing that “such calamities [marital infidelities] are the will of God. A gentleman accepts them. If the woman won’t divorce, he must accept them” (11). Yet, in his dream, he attempts to find a way of releasing Sylvia from their marriage rather than just sticking it out as he previously thought was the proper course.

The instance of sleep-talking follows a particularly painful exchange between Tietjens and Sylvia, in which her former lover, Perowne, attempts to enter her hotel room despite Tietjens’ presence there. Tietjens physically throws Perowne out and causes a scene at the hotel, which also involves another officer, necessitating General Campion’s begrudging intervention given the personal and emotional nature of the conflict. Even after Tietjens’ inner thoughts are revealed, he is still hesitant to talk about them openly, citing social propriety, specifically that of the British. To Levin he says, “You’ll excuse my having been emotional so far. You aren’t English, so it won’t have embarrassed you” (458). Levin, who is Jewish (and therefore non-English to Tietjens), takes offense, but Tietjens does not necessarily mean his statement as an insult, arguing that there is “nothing in the world” the matter with Levin, which is “just what makes [him] un-English” (458). Tietjens claims that “it doesn’t matter what’s wrong with us…” (458), but his argument here constitutes his
first real criticism of the expectation of the English stoicism that disallows him to publically discuss his innermost feelings and also dictates the nature of his interactions with Valentine. Dreaming allows Tietjens a viewpoint from which he can consider feelings he has previously suppressed, but also opens for him the opportunity to talk about those feelings despite their impropriety.

If Tietjens’ dream of discussing leaving his wife with Valentine signifies his true feelings if not hidden desires, and the dreams of soldiers often reveal the source of their neurosis, other dreams are equally revelatory, especially when those dreams are nightmares. Nightmares are mentioned in both texts. Cowley, one of Tietjens’ comrades claims that one of the most common nightmares during the war involved “seeing your dead” (441). This too supports Freud’s ideas concerning dreams pointing to the source of a trauma. Interestingly, Cowley argues that nightmares can be cured by “Epsom salts… And of course you should keep off women for a fortnight” (441). The latter element of Cowley’s “cure” again refers to the idea of the relationship between faulty morality and faulty sleep, as immoral relations with women are said to contribute to one’s nightmares.

Tietjens himself suffers from a recurring nightmare “of the mining Germans who desired that a candle be brought to the Captain. At first, every night, three or four times every night, it had visited him…. Now it came only once every night….” (604). This nightmare has several features relevant to Tietjens’ current situation in the trenches. Present within the nightmare is the perpetual action of the “mining Germans,” representing the constant threat of danger and perpetual nature of the war. Interactions with authority are also included within the nightmare, the bringing of the
candle to the Captain as representative of a sense of duty. In one instance of Tietjens’ experience of this nightmare, he is particularly on edge, unaware of the difference between consciousness and unconsciousness. Ford writes:

He had found the sound of the pickaxes beneath his flea-bag almost unbearable. They were probably our own men. Obviously they were our own men. But it had not made much difference, for, of course, if they were there they would be an attraction, and the Germans might just as well be below them, counter-mining. His nerves had been put in a bad way by that rotten *strafe*. He knew his nerves were in a bad way because he had a ghostly visit from O Nine Morgan. . . . A voice, just under his camp bed, said: “*Bringt dem Hauptmann eine Kerze...*” As who should say: “Bring a candle for the captain…” Just like that! A dream! It hadn’t been as considerable of a shock as you might have thought to a man just dozing off. Not really as bad as the falling dream, but quite as awakening.... (561-62)

Paradoxically, the dream itself leads to his awakening. This dream occurs during a particularly stressful time for Tietjens, subsequent to the death of Morgan, for which he blames himself, pointing to the relationship between stress and nightmares. In fact, during this particular sequence, Tietjens feels himself to be under so much mental pressure that upon awakening, “He cast about in his mind for some subject about which to think so that he could prove to himself that he had not gone mad” (564). One of the signs of mental distress is Tietjens’ inability to distinguish between the state of sleep and wakefulness.

**Privacy**

Tietjens is not alone in his sleep talking; Henry talks in his sleep as well (198). A significant issue raised by the act of talking in one’s sleep is the issue of privacy. Military service, especially during war time, does not lend itself to privacy. Consequently, Tietjens observes that as an officer, his men “watched [him] eternally and knew the minutest gestures of [his] sleep” (570). Ford’s use of “sleep” here is
significant; the men do not just know Tietjens’ behaviors, but his sleep behaviors, or, in other words, his behaviors at a time when he is unable to consciously control them.

Tietjens struggles with this lack of privacy, as Ford describes:

> No scenes. Obviously for the sake of the servants—who are the same thing as the public. No scenes then, for the sake of the public. And indeed, with him, the instinct for privacy—as to his relationships, his passions, or even as to his most unimportant motives—was as strong as the instinct of life itself. He would, literally, rather be dead than an open book. (342)

Talking in his sleep, and the revelations it allows those who witness it, is an extremely uncomfortable experience for Tietjens, who places such a high value on privacy. Insomnia, then, might be interpreted as his act of resistance to revealing himself through sleep-talking. Again, we see Tietjens prioritize his private self over his public self; he would rather forego sleep than risk his sleep-words being used against him. Similarly, Henry attempts to protect his privacy through control of his sleep talking. He is surrounded by Italians, but manages to limit his sleep talking to English so they are unable to understand him (198).

Tietjens is not the only character within *Parade’s End* who talks in his sleep, as there is “a boy” who “was making such a beastly row in his sleep that they could not hear themselves speak,” so he must be removed to a different room (557). The other soldiers “could not tell what had happened to the boy,” but “the acting sergeant-major thought he must have got at some methylated spirits” (557). Here again there is a connection between sleep-talk and trauma, but also disrupted sleep and morality. The officer in authority chooses to point to the boy’s allegedly unhealthy habit of consuming “methylated spirits” rather than “what had happened” (as the other soldiers acknowledge) as the source of the boy’s poor sleep quality. Sherston, too,
witnesses sleep-talking, or at least talking during a state of semi-consciousness.

Sherston writes:

Everyone in the ward seemed to be asleep except the boy whose bed had screens round it. . . . He must be jolly bad, I thought now, as the Sister came from behind the screen again. His voice went on, in the low, rapid, even tone of delirium. Sometimes I could catch what he said, troubled and unhappy complaining. Someone called Dicky was on his mind, and he kept on crying out to Dicky. “Don’t go out, Dicky; they snipe like hell!” And then, “Curse the Wood…. Dicky, you fool, don’t go out!” All the horror of the Somme attacks was in that raving; all the darkness and the dreadful daylight. (365-66)

This soldier’s trauma had something to do with witnessing the death of his comrade, Dicky. Sherston acknowledges that his ravings reveal “the horror” of the war, the true source of the boy’s trauma. Perhaps the boy is reliving a scene in which he feels he could have saved Dicky’s life, bolstering Freud’s argument that what is revealed in the pre-sleep state of semi-consciousness is the “history of the malady that is responsible for the neurosis” (Dreams 194).

According to Simon Williams, Tietjens’, Henry’s, and Sherston’s diminishing sense of privacy is not without social context. Williams argues that, in Medieval times, sleep was often a public affair, in the sense that people often slept, quite comfortably, in public, shared spaces; sleep “was a relatively ‘undisciplined’, ‘undifferentiated’, affair at this time, not least as far as daytime sleep was concerned: anywhere, anytime, one might say” (Society 40). Yet, as time moved on, “this unconcern disappears, slowly in the sixteenth century and more rapidly in the seventeenth, eighteenth, and nineteenth centuries; first in the upper classes and much more slowly in the lower classes” (Williams, Society 40). As Hilary Hinds notes, by the end of the nineteenth century, the shared marital bed itself became an alleged
source of illness, but also loss of privacy: “For [advocates of domestic hygiene] proximity to others was a source of pollution and danger, in the face of which the health of the individual could best be assured by demarcating his or her individuality more clearly through physical separation from others” (281). Accordingly, many couples, at least those who could afford it, opted to sleep in separate beds (Hinds 281). Even as theories of miasma and disease changed, separate-bed sleeping remained fairly popular. In her famous book Married Love (1918), Marie Stopes advises couples to retain separate sleeping quarters when possible (Hinds 298). However, as Williams asserts, “a slight relaxing of these strictures seems to have occurred since the First World War” (Society 40). Indeed, by 1938, Stopes’ opinion changes somewhat, to regard the shared bed as “the arena in which the marriage is to be nurtured and sustained, through the sexual, and thereby emotional, merging of the couple” (Hinds 290). While it makes sense that such strictures would have to have been relaxed because of the war, which required men and women to sleep in close quarters, the earlier anxieties over the inability of close sleeping quarters to allow one to protect one’s health and delineate one’s individuality helps, in part, to explain the anxiety these characters face over shared sleeping quarters and their lack of privacy.

**Idiosyncrasy**

If one must be under constant observation, then one does not want to be caught in a moment of weakness or embarrassment. Thus, mastery over oneself, achieved through the mastery of routine and environment, is a motif present in both the novels and the medical literature of the period. However, despite being lauded for its regulatory effects, the war actually presented an increased sense of the inability to
control one’s environment. The condition of insomnia mimics the life of the soldier or war worker, whose schedule is largely determined by the course of the war. As is depicted in the novels, the soldier or war worker is frequently unable to regulate his or her schedule, thus introducing the idea of idiosyncrasy to the habit of sleep. Regularity is the lack of idiosyncrasy, and much of the literature of sleep to date, such as in the aforementioned examples, focused on the establishment of good sleep habits through creating a sense of regularity. However, the good soldier must be able to master idiosyncrasy. Summers-Bremner argues that insomnia is idiosyncratic because the arrival of sleep is unknown. In effect, the soldier must ape rationalized society itself in order to cope with the conditions of war, but the war itself reveals this type of rationalization to be impossible. She writes, “Electric light and Railway Standard Time leach natural space and time of idiosyncrasy, and, like Taylorist method, both hide the fact that they are doing so” (122). And so must the soldier, by becoming his own form of electric light or standard time.

We see instances of the idiosyncrasy, in terms of lack of control over schedule or environment, in the lives of soldiers in all three novels. For instance, Tietjens is kept up for two days straight to fulfill his duties, “because the draft had been countermanded” (448). He is also subject to “physical irregularities” which have the inadvertent effect of lessening his propensity for self-control, rather than increasing it: “Tietjens wondered how long physical irregularities would inconvenience his mind. You cannot think well with a parched back to your tongue. . . . Then he had nothing to go on to tell him how long he would be inconvenienced!” (600). Treatments for insomnia and neurosis often focused on the exact opposite: control of physical
conditions and imposition of regularity. Yet, participation in the war introduced the opposite conditions into the soldiers’ lives. Furthermore, other physical conditions leading to idiosyncrasy contributed to lack of control rather than its increase. For example, Tietjens, under bombardment, finds his intellectual faculties reduced rather than heightened by the discipline he must show. Ford writes, “There was so much noise it seemed to grow dark. It was a mental darkness. You could not think. A Dark Age!” (637). The Dark Ages, the period before the Renaissance, represents a time during which education and literacy, as well as the valorization of intellect, diminished. The mental darkness Tietjens is experiencing under the bombardment is worth comparing to a passage in which Ford discusses the function of discipline:

> It was a very great achievement to have got men to fire at moments of such stress with such complete tranquility. For discipline works in two ways: in the first place it enables the soldier in action to get through his movements in the shortest possible time; and then the engrossment in the exact performance begets a great indifference to danger. When, with various-sized pieces of metal flying all round you, you go composedly through efficient bodily movements, you are not only wrapped up in your task, but you have the knowledge that that exact performance is every minute decreasing your personal danger. (581)

Here discipline is not presented as control over one’s thoughts, but as the ceding of one’s thoughts to training; it removes idiosyncrasy. The soldier ceases to be an individual, in control of his environment; rather, he is under the control of his learned behaviors. Despite its discursive presentation, discipline is not truly self-control taken to an excess; it is the willing relinquishment of that control to a series of prescribed motions and behaviors. Given the contrast presented in text between the theory of discipline as desirable and healthy and the actual reality of war experience, the idiosyncratic conditions of both time and environment introduced by participation
in the war seems to counter to the idea that regularity increases discipline, which, in turn, increases one’s ability to adapt to idiosyncrasy while maintaining mental and emotional control. Soldiers could not be expected to be regularized in a situation in which regularity is impossible, leaving the conclusion that they were merely expected to be able to control themselves to the extent that it allowed them to follow orders and act without thought. Self control as mastery of the self, then, is mythical; it is merely the consequence of authoritative control.

For Sherston, the idiosyncrasy of war time and reality has a similar effect and consequent revelation. His schedule and duties require that “there was a working party every second night, which meant being out from seven o’clock till after midnight” (310). He acknowledges that such a lifestyle changes the way in which he sees time itself: “Sooner or later I should get windy myself. It was only a question of time. But could this sort of thing be measured by ordinary time, I wondered” (310). Time, for Sherston, cannot be understood in terms of set schedules or hours for waking and working. Time is merely a function of extent to which he can maintain his composure. He continues, “Trench life was an existence saturated by the external senses; and although our actions were domineered over by military discipline, our animal instincts were always uppermost. While I stood there then, I had no desire to diagnose my environment” (311). Similar to Tietjens, Sherston displays a sense that discipline is only a façade, especially in such idiosyncratic conditions. He can maintain the appearance of discipline, just as Sylvia can maintain the appearance of morality through her focus on physical beauty, but in reality, Sherston sees himself as an animal, one who reacts rather than plans and controls. He falls back on his
training to determine his actions. This notion runs contrary to the British ideal of constitutional self-mastery and control. No degree of discipline can completely inure humans to environmental hardships. Even if the outer expression is one of calm, the inner state may be completely opposite, as Sherston and Tietjens illustrate. Henry also expresses the fear that discipline is not enough to protect people from breaking down as a result of the war. In a conversation about the seeming endless nature of the war, Henry responds that it must inevitably end, but only because “It will crack somewhere” (20). Catherine responds, “We’ll crack. We’ll crack in France. They can’t go on doing things like the Somme and not crack” (20). Both of them acknowledge that the nature of the war itself leads to breakdown. Much later in the novel, once he has given up his role in the war, he thinks, “If people bring so much courage to this world the world has to kill them to break them, so of course it kills them. The world breaks everyone and afterward many are strong at the broken places. But those that will not break it kills” (249). Henry comes to view breaking or cracking in a positive light. Breaking actually protects people. Those who refuse to break or are unable to do so, like Septimus, end up dying. The only way to survive is to first crack and then be repaired, like Sherston. Remaining too disciplined for too long only leads to death, as it would have for Henry if he had confronted the military police attempting to arrest him rather than escaping them.

**Insomnia as Literary Device**

While all three of the novels this chapter discusses illustrate insomnia in phenomenologically similar ways, pointing to it as physical evidence of resistance to the disciplinary mechanisms of the military, a reaction to the horrors and stresses of
war, and a time for characters to reassert their individuality and personal priorities, the texts make use of insomnia in different ways as a structural device. For Ford and Sassoon, insomnia expresses a sense of liminality. Both of their protagonists, Tietjens and Sherston, are caught in liminal positions. For Tietjens, his marriage to Sylvia is liminal, as is his relationship with Valentine. Through much of Parade’s End, Tietjens remains married to Sylvia for the sake of appearance, despite their emotional and physical separation. His marriage to her is a consequence of his valorization of conservative morality, as he uses the marriage to protect her public image. Many instances of Tietjens’ insomnia are used to reflect the liminality of this marriage, as he often has insomnia at times when their marriage is the subject of his thoughts or public discussion. For example, I have already discussed the passage in which he stays up at night to review the history of their marriage after Morgan’s death. Another example occurs when Sylvia’s scandalous behavior, running off to France with Perowne, threatens to be a matter of public knowledge. Later that night:

Tietjens fell, nevertheless, at once prey to real agitation. For a long time he pounded from wall to wall and, since he could not shake off the train of thought, he got out at last his patience cards, and devoted himself seriously to thinking out the conditions of his life with Sylvia. He wanted to stop scandal if he could; he wanted them to live within his income, he wanted to subtract that child from the influence of its mother. These were all definite but difficult things. . . . Then one half of his mind lost itself in the rearrangement of schedules… (79)

In this passage, we see Tietjens struggling to direct his thoughts, and consider his marriage calmly, but his mind itself is in a liminal state, as one half focuses on his marriage, while the other half focuses on “the rearrangement of schedules.” Further, this passage describes the liminality of his marriage, as he is within this liminal state of insomnia experiencing the liminality of a divided mind. He simultaneously wants
to protect Sylvia and live as a married couple, at least financially, but remove her from her role as mother. His role as father is a bit doubtful though, referring to his son as “that child” and “it,” thus neither by his name or even by his gender, and certainly not possessively, as in “our” child or “my” child (he suspects the child his not his). Interestingly, when Sylvia feigns leaving Tietjens, by leaving the country via Paddington Station, she does so in the early morning hours when Tietjens is awake in bed and can hear her directions to the driver (343).

Similarly, Ford uses the liminality of insomnia to mirror the liminality of Tietjens’ relationship with Valentine. Their first extended interaction takes place late at night as they try to escape Valentine’s friend escape the legal ramifications of her golf course prank. During their ride, Valentine comments that she is “not sleepy” but rather “loving it all” to which Tietjens responds “I’m rather loving it too!” (131). The scene of their interaction takes place in a heavy fog, further obscuring their proximity, but also reflecting their uncertainty of where they stand in relation to each other. In fact, in the fog, he “almost kissed her” (137) but restrains himself, as this action would violate his sense of propriety. Tietjens finally returns Valentine home in the morning, but not after their relationship has been publically exposed, leading to the scrutiny he will experience at the military camp (143-44). Through juxtaposing the origins of Valentine and Tietjens’ love with both insomnia and fog, Ford uses textual liminality to expose Tietjens’ personal liminality.

Additionally, Tietjens is in a liminality of position with regard to his military service. He clearly cares a great deal about his men, given the depth to which he feels the pain of Morgan’s loss, and he sees the propriety of his leadership role within the
military, as well as his subordination to his superiors, because of his social status and ethics. Yet, at the same, for reasons I have discussed earlier, he questions the validity of disciplining both his own body and the bodies of his soldiers. Sherston is similar in this sense, feeling a responsibility to his country and sense of patriotism, yet, at the same time questioning the war. As with Tietjens, the liminality of Sherston’s insomnia reflects his sense of being between different states: patriotic soldier and pacifist war critic.

For Sherston, as with Tietjens, one liminality begets another. His liminal role regarding the war places him in a liminal situation regarding his sanity. He feels himself to be perfectly sane, but must claim insanity in order to avoid a return to war. Further, he is caught in the liminal position of wanting to assert agency through renouncing the war, but his ability to assert this form of agency comes only when he renounces his ability to assert agency over his life more broadly and has himself committed to a mental hospital. He refers to the transitional state between military duty and renunciation of this duty as a “double life” (490). Insomnia plays a significant role in his decision-making process, as it during bouts of insomnia in which is resistance is born. However, his resistance places him in a “purgatorial limbo” (508). The novel ends with his admission to Slateford War Hospital (514). Though he has to willfully deny his own sanity, he ends up pleased with the result.

Hemingway uses Henry’s insomnia in a different manner. While Henry does place himself, at times, in a liminal position, he is a medical worker in the war rather than a soldier. His duty is to heal rather than hurt; thus his position is less morally tenuous. For Henry, rather than symbolizing liminality, his insomnia represents, at
least in part, a fear of loss. William Adair argues that “things happen to
Hemingway’s protagonists: they do not control things, they are victims. And the
essential thing that happens to them is loss rather than violence” (294). Insomnia, for
Henry, then becomes a means through which he can control himself and his
surroundings. He does not sleep, so he does not lose himself to it. Adair continues,
“Nick [of “Now I Lay Me”] and Frederic [Henry] (before he loves Catherine) may
fear in the night that if they shut their eyes and let themselves go that their souls will
slide out of their bodies and they will die. But the Hemingway protagonist has
another fear in the night, the fear of loss” (297). Insomnia becomes a means both by
which characters can control their souls and also avoid the temporary loss of self that
sleep requires. Insomnia is used in A Farewell to Arms as a way for Henry to reassert
his selfhood when everything else in his life is increasingly destabilized.

Conclusions

Despite the assertions of war’s regularizing effect and the industrial emphasis
on increasing productivity and utilizing time efficiently, as well as maintaining
discipline, the war often appeared to do the exact opposite and lead to break down of
discipline and much time wasted. Ford writes about “the process of eternal waiting
that is War”:

You hung about and you hung about, and you kicked your heels until
and you kicked your heels: waiting for Mills bombs to come, or for
jam, or for generals, or for the tanks, or transport, or the clearance of
the road ahead. You waited in offices under the eyes of somnolent
orderlies, under fire on the banks of canals, you waited in hotels, dug-
outs, tin sheds, ruined houses. There will be no man who survives His
Majesty’s Armed Forces that shall not remember those eternal hours
when Time itself stayed still as the true image of Bloody War!..... (569)
For all of industrialized society’s Tayloristic notions of increasing productivity, the war ended up being the exact opposite, a process of endless waiting rather than endless working. The irony is that the emphasis on productivity was never relinquished, yet, at least according to this passage, it was hardly the soldier’s fault if he were not productive: he was waiting for everyone but himself. This type of reality, in the face of a completely contrary discourse of incessant productivity (even rest time being considered constructive), must have created a type of cognitive dissonance. The citizen could never live up to the society’s expectations, mostly because of the authority structure itself. Yet, at the same time, the war was portrayed as a means of creating ideal citizens, ones who were productive, contributing members of society, in control of both their time and their emotions.

Ironically, but a logical antecedent of the contemporary discourse, war even came to be considered a cure for trauma because it could correct degeneracy in society through its emphasis on regularization and discipline, and the ideal aim of a cure was to send the soldier back to war as quickly as possible (Lerner 27). According to Showalter “The goal of wartime psychiatry was primarily to keep men fighting” (Female 176). The cure for mental disorders based in trauma is primarily rest-based, but patients were encouraged, if not required, to remain in the army, as “the prospect of discharge from the army was apt to delay recovery,” at least according to medical authorities (Lerner 64). War was viewed as a way to establish good habits, of the type needed to prevent and cure insomnia, mainly because of the ostensible focus on discipline and routine. At the beginning stages of the war, the war was largely understood by the British community as a cleansing force:
The assumption of the polarity of war and peace allowed contemporaries to experience the declaration of war as a movement from normal, familiar life to an alternative existence which differed markedly from bourgeois society. It was commonly felt that, with the declaration of war, the populations of European nations had left behind an industrial civilization with its problems and conflicts and were entering a sphere of action ruled by authority, discipline, comradeship, and common purpose. (Leed 41)

War, in other words, would purify society, ridding it of its degenerate elements through the establishment of discipline to obtain a universal societal goal of productivity, much in the same way requiring doctors to work rigorous and trying hours during their training weeded out the weak among them.

Yet, contrary to these expectations, in reality, the war introduced the aforementioned idiosyncrasy, as opposed to routine and regularity, into the lives of soldiers, with its resultant contradictory messages. In a sense, though the war was lauded for its “cleansing” abilities, it really introduced the type of “mental un-tidiness” to which Tietjens attributes disease (614). Ironically, just as the causes for insomnia are often perceived to be a result of mental “un-tidiness,” and the consequences of insomnia include mental impairment and clouded thinking, the treatments often focus on “cleaning up” one’s routine and mind. James, similar to many of the medical authorities mentioned previously, argues that mental health and sleep are connected. He refers to a specific mindset, which he labels “healthy-mindedness.” He defines “healthy-mindedness” as “the tendency which looks on all things and sees that they are good,” and this trait can either be naturally occurring or can be cultivated by the individual (“Religion” 85-86).

Healthy-mindedness, while not necessarily connected with a particular religion, embodies a specific type of religious temperament. In religious thinkers not
preoccupied with hellfire and damnation, James sees “the presence of a temperament organically weighted on the side of cheer and fatally forbidden to linger, as those of opposite temperament linger, over the darker aspects of the universe” (81). In more extreme cases, a religious temperament can prevent the individual from feeling any evil at all (82). James cites two cases in which the person who did not adopt a healthy-minded, religious outlook suffered from lack of sleep. He transcribes an interview with a man whom he describes as “a sufficiently familiar contemporary type,” who claims that “[Religion] is nothing” (89). This particular man diagnoses his own temperament as being “nervous, active, wide-awake, mentally and physically. Sorry that Nature compels us to sleep at all” (90). James also relates a letter from a woman who writes, “Life seemed difficult to me at one time. I was always breaking down, and had several attacks of what is called nervous prostration, with terrible insomnia, being on the verge of insanity” (99). Despite the work of numerous doctors, and even narcotics, the woman was not cured until she accepted the “New Thought” and began to adopt “a constant turning to the very innermost, deepest consciousness of our real selves or of God in us for illumination from within” (99). Once she adopted a religious outlook, her mental and emotional problems ceased to trouble her. “Healthy-mindedness” in practically any character is far from present in the literature of Ford, Hemingway, or Sassoon, illustrating this particular discursive element through its negation. None of the insomniac characters depicted in Ford, Hemingway, or Sassoon can be said to have particularly optimistic or accepting outlooks; they are consistently portrayed as over-thinkers and people not cheerily accepting, but struggling to understand, their place in the world.
In addition to fostering the ability to think in a “healthy-minded” way, treatments were designed to reduce cost (of the treatment) and maximize efficiency (in the sense that the goal of the cure was more about returning soldiers to battle than actually making them feel better). Economic motivations dictated treatment:

Forced to handle unprecedentedly high numbers of patients with limited resources, doctors borrowed from industrial models, developing “assembly-line” techniques for making diagnoses, treating patients, and ruling on pension and discharge matters. Speed and efficiency became the primary medical values, as methods of treatment and administration were centralized and rationalized, and a comprehensive approach to the psychic health of the whole nation was adopted. (Lerner 18)

Perhaps, in hindsight, such methodology seems counter-intuitive but served its purpose, illustrating the way in which the theories presented by the medical establishment served the existing power structures.

Consequently, and not surprisingly, one possible cure for neurosis was thought to be productive work: “men with psychological disabilities were channeled into work situations which fitted their psychological strengths and abilities” (Lerner 19). The “channeling” described by Lerner does not apply exclusively to soldiers suffering from mental illness. In fact, the medical field made numerous attempts to direct physically wounded soldiers into post-war work that “complemented” their injuries. Frank and Lillian Gilbreth write, “A prime necessity is to inspire the cripple with the feeling that he can remain, or become, a productive member of society” (135). Gilbreth and Gilbreth describe ways in which people with various injuries can be fit into specific fields that suit them given their limitations: “It will mean fitting for useful vocations of thousands, who otherwise would be dependents upon society, which is always a greater burden to the one so afflicted than to those of society who
bear the expense of such disability” (146). Discursively, this idea of the war as a “cure” or “cleansing” proffered by the medical community in conjunction with the arm of the state serves the primary function of justifying the war itself. The war must be righteous if it can “fix” the wrongs of both society and the individuals involved in the war. If the war harmed instead of fixed, it was merely a matter of the weakness of the individual and a result of his inability to accept necessary discipline.

Ultimately, the insomniac is one whose mind and body refuse to be disciplined, whether it be by choice, circumstance, or one or more countless other factors. Discursively, discipline is presented as self-control, but the reality is quite different. Discipline only constitutes self-control inasmuch as it entails one’s ability to give up that control for what one perceives to be the greater good, whether that consists of doing one’s duty as a soldier or being a productive member of one’s society. True discipline, as self-control, is a myth. That the very condition of insomnia exists proves that the mind cannot be fully in control of the body all of the time, nor can the individual be fully in control of his or her mind. The revelation of this myth of complete self-control is very dangerous to a society that relies on compliance based in discipline, masked as self-control. Therefore, those in power turned to the insomniacs when looking for a place to which their accusatory fingers could point. Insomnia is constitutional, they argued, a flaw of the individual. Conveniently, much as the cure for war trauma involved returning to the war as quickly as possible, the cure for insomnia consisted of giving oneself over to structure and discipline, to quieting the questioning voices inside of one’s head in favor of complacency and acceptance. For this reason the insomniac is treated as a deviant,
one with a pathological condition worthy of scrutiny and treatment. It is the insomniac who reveals the limitations of social discipline, coming with the idea that the power of society is not so omnipotent as to enable the will to fully control the body, despite all of the citizens’ reasons for doing so. The insomniac’s tendency to exist liminally, at odds with ideals of the power of the mind over the body, illustrates that there are ways in which citizens can fail to work towards the greater good without it merely being a matter of their unwillingness to subject themselves to discipline in the war-time situation, thereby prioritizing the individual self (as husband or pacifist) over the soldier-citizen.
CHAPTER 4

BEAUTY SLEEP(LESSNESS): GENDERED SLEEP PRACTICES

Louis Althusser argues that “there is no ideology except by the subject and for subjects. Meaning, there is no ideology except for concrete subjects, and this destination for ideology is only made possible by the subject: meaning, by the category of the subject and its functioning” (115). Ideology, which Althusser defines as “the imaginary relationship of individuals to their real conditions of existence” (109), is both produced and enacted by subjects, but also produces the subject itself. His use of the words “destination” and “concrete” implies that ideology has a physical, spatial component, specifically the human body, but more specifically, as I contend, the gendered body. Further, ideology enables and requires categorization of subjects; gender is one such means of categorization. As I have argued, through the creation of the identity category of the “insomniac,” insomnia is another means of categorization. In this chapter, my goal is to examine the intersection of these two categories, the gendered insomniac body, as it produces and is produced by ideology. Because the insomniac is a discursively produced category (as is gender), as a form of subjectivity, this category both reflects and contributes to the creation and enactment of ideology. Examining the way in which insomnia functions for different gender-identity categories, phenomenologically, psychologically, medically, and politically reveals not only the ways in which ideology and gender are related to both produce and perpetuate such identity categories, but also the ways in which the subject can
expose, resist, and, therefore, change the ideology associated with such categories through insomnia.

Susan Bordo, building on Althusser’s theories, argues not only that the subject is both product and producer of ideology, but also that the subject’s body is a surface upon which ideology is made visible. According to Bordo, the body is “a politically inscribed entity, its physiology and morphology shaped by histories and practices of containment and control” (21). The disordered body, for Bordo, is particularly revealing. Writing of disorders such as anorexia, hysteria, and agoraphobia, she argues, “The symptomatology of these disorders reveals itself as textuality. . . .” Working within this framework, we see that whether we look at hysteria, agoraphobia, or anorexia, we find the body of the sufferer deeply inscribed with an ideological construction of femininity emblematic of the period in question” (168). The disorders she describes are historically associated with women, but her argument can also be applied to insomnia in any gender. Insomnia is a disorder that cannot exist without a culture that regulates and normalizes sleep and, as such, it often exposes a conflict between the insomniac and ideologically based expectations. Without the production of the “proper” and “normal” behaviors and conditions of sleep, disordered sleep is not possible. Insofar as these proper and normal behaviors and conditions are related to gender, insomnia is produced and interpreted relative to differently gendered bodies. In terms of symptoms of insomnia, including restlessness, anxiety, exhaustion, altered perception of time, frustration, and relationship to various forms of productivity, insomnia makes visible and exposes
social conditions and practices that emphasize physical and mental discipline; sleep as an extension of the working day; and active, economic productivity.

In order to examine the ways in which the insomniac is produced as a gendered subject, I will again use a model proposed by Michel Foucault. In the second volume of *History of Sexuality: The Use of Pleasure*, Foucault proposes three analytic categories, which he applies to the analysis of sexuality: “(1) the formation of sciences (*savoirs*) that refer to it, (2) the systems of power that regulate its practice, (3) the forms within which individuals are able, are obliged, to recognize themselves as subjects of this sexuality” (4). I will apply a similar model to insomnia through a discussion of scientific and medical developments related to the study of disordered sleep, attempts at regulation of sleep habits and practices, and ways in which the insomniac becomes an identity category that is applied to bodies of different genders.

In other words, my goal is to examine the formation of ideology as it relates to the insomniac’s subjectivity.

As I argued earlier, because the individual both produces and enacts ideology through his or her body, it is important to discuss the implications of insomnia itself. What does the experience of insomnia in a given body reflect about a culture in a specific time period? Further, how is one’s perception of one’s insomnia mitigated by culture and ideology? Invariably, the argument is dialectical: ideology shapes perception and perception shapes ideology. As ideology shifts, so does perception, and then ideology and so forth. To be perceived as an insomniac shapes the perception of the insomniac, which, in turn, shapes what it means to be an insomniac.

The insomniac is not simply subjected to the power of categorization, but has an
active role in producing and shaping that category. Therefore, the implications of categorization as an insomniac reflect the workings of power, both as power enacted on a subject, but the power of the subject to use his or her categorization to his or her benefit. As Foucault argues in the first volume of *The History of Sexuality: An Introduction*, power is exercised and productive, not as an “all-encompassing opposition between rulers and ruled,” but as part of a “machinery of production” operating on all levels of a social order (94). Resistance, for example the insomniac’s refusal to sleep “normally” (whether intentional or incidental), is “never in a position of exteriority in relation to power” (95), but part of the functioning of power—it is a productive power in and of itself, which “undermines and exposes [power], renders it fragile and makes it possible to thwart it” (101). In this regard, insomnia is a form of power insofar as it shapes perception and ideology, but also as it provides the insomniac a means of resistance to control of sleep as a disciplinary mechanism. Insomnia exposes the individual’s prioritization of the self he or she chooses to develop during insomniac-time, but may also expose a tension between the individual’s prioritization and external, ideologically-based expectations.

Insomnia can be used to both produce and counter expectations of gendered subjectivity. During the time period I am discussing, many medical professionals believed that males and females reacted to insomnia differently and experienced insomnia for different reasons, as I will discuss in more detail to come. Thus, the perception of the insomniac (symptoms, consequences, diagnosis, treatment) and the insomniac’s perception of his or her condition is influenced by gender norms. For example, a mother who stays up all night nursing a sick child is not discursively
considered an “insomniac”; rather, she is a “good mother.” Whereas, a mother who stays up late at night pursuing other interests, perhaps because it is the only time she has free, would be an insomniac, but also, might be scrutinized with regard to her priorities. Similarly, a man who works late into the evening to earn money for his family is “a good provider” or a “go-getter,” yet that same man, if he foregoes sleep for a non-work related activity, puts this same status in question. As a consequence, examining the gendered treatment of insomnia and the insomniac can be used to expose, as well as challenge, gender conventions. Because insomnia is so closely tied in with other aspects of one’s subjectivity, including one’s gender, but also other parts of one’s identity including job and familial role (areas also influenced by gender), any discussion of the relationship between insomnia and gender must also involve these other areas of inquiry.

To conduct my examination of insomnia and gender, I will look at three literary texts, as well as medical and psychological texts written during the same time period. The three literary texts upon which this chapter focuses are Dorothy Richardson’s Pilgrimage (a collection of thirteen chapter novels), H. G. Wells’ The Soul of a Bishop, and Elizabeth Bowen’s The Last September. Pilgrimage follows the life of one female character, Miriam Henderson, as she grows into womanhood during the period of social and cultural transition at the end of the Victorian Era. Miriam is an insomniac and proud of it. She enjoys her insomnia for the freedom and privacy it affords her. Further, Miriam uses her insomnia in defiance of gender norms, but, simultaneously, she takes advantage of gender norms regarding sleep and mental health practices to attain the independence she desires. Wells, a friend of
Richardson, and character in *Pilgrimage* (under the alias Hypo Wilson), is one of the figures in the novel who attempts to control Miriam’s insomnia because he sees it as in conflict with her ability to become a fit mother. In his own novel, *The Soul of a Bishop*, Wells depicts the life of an insomniac, Edward Scrope. Scrope, unlike Miriam, is ashamed (at least initially), rather than proud of his insomnia, but his insomnia performs an important role in his transformation from spokesman for the Anglican Church to spokesman for his own spiritual disavowal of organized religion. His insomnia allows him a series of revelations about the inefficacy of the Church in addressing the problems of the modern age and is a necessary force in his spiritual and personal transformation. Yet, his insomnia puts him in a state of conflict, not only because it makes it physically and mentally difficult for him to perform his role, but also leads to the questioning of his role in the Church, which, in turn, complicates his role as provider for his family—his expected role based on his gender. The final text, Bowen’s *The Last September*, depicts of a whole group of insomniacs in an Irish household just after World War I. I will use this text to illustrate the ways in which a female author depicts insomnia within the same text differently according to the characters’ genders. Additionally, I will examine the extent to which these three texts both reflect and challenge contemporaneous medical and psychological discourse regarding insomnia and the insomniac.

**Insomnia and the Body**

All three of these texts describe the ways in which insomnia becomes an essential aspect of the care of the self, as described by Foucault, which I discuss in the introductory section of this dissertation. Especially in the first two texts, those by
Richardson and Wells, insomnia becomes a source of conflict for the character because, through their insomnia, they are caring for their non-social selves (their academic, artistic, and spiritual inclinations) rather than their expected social roles. As physician W. Johnson Smyth argues, treatment for insomnia requires attention to one’s individuality and background (227). In other words, insomnia forces one to be regarded individually, outside of general categories of identity. Insomnia becomes both a form of categorization, but also a resistance to it, as the insomniac cannot simply be regarded as like all other insomniacs. Thus, insomnia becomes a bodily expression of resistance to fixed identity categories. Miriam’s insomnia makes her question her desire for motherhood and role as caretaker (assigned to her by simple virtue of being a female), and Scrope’s insomnia makes him question his role within the Church, thereby jeopardizing his role as provider for his family. Though friends and physicians advise both characters on how to treat their insomnia, and, as a result, resume their expected roles, the characters resist or take advantage of these treatments and ultimately embrace their insomnia. Miriam embraces her insomnia because she sees it as a means to independence. Scrope finds that the insomnia and its treatments (psychotropic and hallucinogenic drugs) afford him spiritual revelations and transform his, and his family’s, financial circumstances and social position.

In his creative non-fiction text about his insomnia, contemporary writer Blake Butler describes his insomnia, in part, as a hyper-awareness of his body: “The restless body, rolling, finding partial conditions, in continual correction, begins to feel simultaneously thicker and thinner, stuffed and hollow—like a wet but drying bar of soap, hard at the center, soft around the edges, mushy, comes off on your hands. The
fidget begets a fidget” (32). His language in this passage, aside from the expression of bodily sensation, is also expression through bodily sensation. All of his sensations are contradictory, illustrating the contradictory nature of insomnia itself: the body and mind at war over sleep, each striving to become unconscious of the other. Insomnia becomes a conflict both inscribed on and experienced through his body. As a contradictory bodily experience, insomnia becomes a particularly useful device to illustrate other conflicts of the body, such as those of gender and sexuality, which can be expressed via the bodily experience of insomnia.

Richardson expresses this sort of bodily awareness through insomnia in Pilgrimage. Miriam often stays up late at night reading, choosing insomnia despite being tired because it is the only time she can find to pursue her own interests, primarily academic ones traditionally limited to males. Her insomnia becomes a means of transcending gender roles; thus, her insomnia indicates both her awareness of these roles and her desire to use her body to resist them. Miriam’s reading is an act of rebellion against gender norms for multiple reasons, including actively reducing her efficacy as caretaker of children (her students) through cultivating exhaustion in order to gain entrance into a wider social and intellectual sphere. One of Miriam’s first experiences with insomnia, described in Backwater, is presented in a morally ambiguous light through use of religious terminology:

For the last six weeks of the summer term she sat up night after night propped against her upright pillow and bolster against the gas-jet reading her twopenny books in her silent room. Almost every night she read until two o’clock. She felt at once that she was doing wrong; that the secret novel reading was a thing she could not confess, even to Miss Haddie. She was spending hours of the time that was meant for sleep, for restful preparation for the next day’s work, in a ‘vicious circle’ of self-indulgence. It was sin. (1: 282)
Miriam clearly finds her reading experience pleasurable. She chooses to stay awake and read, she enjoys reading, and she enjoys the time and space that being awake alone at night allows her. However, her pleasure is tinged (and perhaps intensified by) guilt, as she has a distinct sense that she is doing something that she should not. And, in fact, proper sleep habits are often equated with morality. For example, in a 1919 book on child rearing, author A. B. Barnard comments, “The formation of good habits is the basis of morality and intellectual efficiency” (99). Yet, Miriam resists forming “good” habits of sleep. She knows that it is her responsibility, as a teacher (caregiver), to be prepared for the next day’s lessons. In choosing not to sleep, she is willfully using her body to detract from her effectiveness at filling her role.

In this passage from Backwater, Miriam views insomnia as a moral concern, using words like *sin* and *confess*, but also as a medical issue, reflecting both Victorian and Edwardian medical literature, which often conflated morality and science; the literature frequently represented disease and disorder as caused by a combination of physical and moral irregularities. Miriam discusses her insomnia as a form of “self-indulgence.” Physician Silas Weir Mitchell, originator and proponent of the “rest cure,” which was designed to treat patients diagnosed with hysteria and neurasthenia, also uses this type of language. Mitchell’s rest cure, which he explains in his text *Fat and Blood* (1885), involves a regimen of seclusion, rest, and diet (emphasizing milk and raw meat as fattening agents) (44), with a combination of controlled exercise or electricity and massage to compensate for the absence of muscle movement (55). It prohibits amusements, like reading or sewing, in order to render patients more obedient and responsive to the doctor's orders (58).
Mitchell views hysteria not only as a disorder to be treated medically, but also as a form of selfishness and self-indulgence on the part of the patient. His patients, most of whom were female, are not considered “productive” members of their households and “failed” at fulfilling familial duties. He describes his patients as “invalids, unable to attend to the duties of life, and sources alike of discomfort to themselves and anxiety to others” (9). Mirroring Miriam’s (somewhat ironic) description of her insomnia as “sin,” Mitchell writes of the “moral degradation” of his patients (39), whose sickness serves to “cultivate self-love and selfishness, and to take away by slow degrees the healthful mastery which all human beings should maintain over their emotions and wants” (40). While in this scene Miriam does not suffer from hysteria, she does expose a discursive presentation of women who acted contrary to their expected caregiver roles as selfish and immoral through her characterization of her decision not to sleep as a self-indulgent act, focusing on her own “wants” because it may affect her ability to teach and care for her students.

Further illustrating Miriam’s simultaneously moral and medical characterization of insomnia, she refers to her insomnia as “a vicious circle.” The idea of the “vicious circle” in medical literature is outlined in a 1913 text, *Vicious Circles in Disease*, by physician Jameison Hurry. Hurry argues that chronic disease is a product of “vicious circles,” in which “two or more disorders are so correlated that they reciprocally aggravate and perpetuate each other” (xiii). These types of diseases are an example of nature’s “beneficent influence” becoming “maleficent” (xiii). At this stage in *Pilgrimage*, which Richardson began writing two years later in 1915, Miriam does not yet see her insomnia as a possible symptom of hysteria (as she
will, following her mother’s suicide); however, she does express Hurry’s idea of correlation and perpetuation with regard to her insomnia. Her lack of satisfaction with her job creates her desire to find satisfaction during her undisturbed time (sleep time), which, in turn, leads to a lack of sleep, making her already dissatisfying job even more difficult and arduous. She continues to attempt to find an escape through her nightly reading, which aggravates her exhaustion, which increases the difficulty of her job, and the circle continues. Her insomnia is both product and cause of her sense of dissatisfaction with her life and her desire to find satisfaction independent of her assumed role, reflected through her bodily actions.

According to Bordo, the body is “a surface on which the central rules, hierarchies, and even metaphysical commitments of a culture are inscribed and thus reinforced” (165). She argues that disorders are a means of exposing “fragility and lack of power in the face of a decisive male occupation of social space” (171). The disorders that she discusses, such as anorexia and hysteria, are disorders of idealized femininity (168), as I describe earlier, which Miriam’s insomnia is not. Miriam’s insomnia is not reflective of her domesticity (agoraphobia) or her desire to take up less physical space and practice self-denial to provide for others (anorexia). Rather, her insomnia challenges, rather than perpetuates, such an ideal since she sees it as a form of self-indulgence and intellectual expansion. However, Miriam’s insomnia shares many characteristics that the female anorexic embodies—self-control, discipline, determination, which are stereotypically “male” characteristics (Bordo 171). She uses her insomnia to learn about herself and to pursue interests outside of those deemed appropriate for a woman of her time period. Miriam sees self-
consciousness as a means of comprehending, and thereby entering the “world of men” (Hanscombe 48). Gillian Hanscombe argues that “Richardson sees Miriam’s gradual acquisition of insight and control as an act of consciousness rather than an act of will, that is, as intellectual rather than moral virtue” (54). On several occasions, Miriam describes herself as being more male than female, or thinking in a masculine way. For instance, she thinks, “Perhaps I can’t stand women because I’m a sort of horrid man” (1: 404). She uses her insomnia as a time to occupy traditionally male spaces. She does this intellectually, in part through reading. For example, she desires to talk to her employer about her reading “man to man, about the book. She could not do that. Everything she said would hurt her, poisoned by the hidden sore of her incapability to do anything for his children” (1: 383). In this passage, she wants to meet her male employer, Mr. Corrie, as an intellectual equal, but knows it would only ruin his image of her as an appropriate governess for his children because she would be stepping outside of her assumed female role by asserting her intellect. Her desire to meet him as a man (“man to man”) illustrates her desire to step outside of the feminine caregiver role, but she understands this redefinition of herself only makes her household position more tenuous.

Yet, even in identifying with men, she feels aversion as well: “How utterly detestable mannishness is; so mighty and strong and comforting when you have mewed up with women all your life, and then suddenly, in a second, far away, utterly imbecile and aggravating, with a superior self-satisfied smile because a woman says one thing one minute and another the next” (1: 423). She realizes that, try as she might, men will never meet with her on an equal level, and despite her sense of
independence and pride in her intellect, many will persist in seeing her as inferior and weak. She realizes she will never be (nor does she want to be) the person others come to expect simply because she is a woman: “For a long time she sat blankly contemplating the new world that was coming. Every one would be trained and efficient but herself” (1: 244). She has made it a point not to cultivate efficient sleep habits. Miriam’s body does not want to conform to the expectations placed upon it, and her language in this passage indicates her sense of a social drive towards maximization of productivity and efficiency, which requires every individual to play his or her part effectively. Yet, she resists playing this part.

More tellingly, Miriam’s insomnia allows her not only to use her body as a force of rebellion, but to experience her body itself as a contradiction of gender norms. Her insomnia allows her to perceive her body differently, as not only a feminine body; thus it is through her insomnia that she is able to transcend discursive representations of womanhood. Her views are supported by contemporary medical attitudes that differentiate female insomnia from male insomnia and see femininity itself as a cause of insomnia. As A. W. Macfarlane argues, “Sleeplessness or disturbed sleep is apt to appear in females from causes peculiar to the sex” (279). These causes, according to MacFarlane, include puberty, menopause, menstruation, pregnancy, and giving birth (279), or, in other words, nearly any condition unique to female biology (with the exception of puberty, which MacFarlane does not discuss as a cause for insomnia in males). Further, insomnia “chiefly affects those of neurotic temperament, with highly-strung and unduly sensitive nervous systems, and those debilitated by neurasthenic conditions” (MacFarlane 279). The latter statement is the
second sentence of his chapter entitled “Insomnia Peculiar to Females,” so, while it would seem that although people of any gender might be “highly-strung” or “unduly sensitive,” clearly these are conditions he equates with women and sees as worth mentioning at the start of this chapter. Incidentally, he never actually addresses these psychological conditions in this chapter; he has other chapters devoted to psychological conditions, which makes his mention of neurosis quite interesting, and seemingly gratuitous at this point. Notably, MacFarlane’s text does not include a chapter entitled “Insomnia Peculiar to Males,” indicating that biological factors exclusive to masculinity are, by themselves, not causes of insomnia. Further, devoting a chapter to females suggests that males are the assumed standard of normalcy against which females are judged.

Yet, Miriam’s insomnia is not caused by a condition such as menstruation, menopause, or pregnancy (at least not in this particular passage with regard to pregnancy). During one bout of insomnia, she has an experience of her body as “other” to the bodies of women: “it was only when she was alone and in the intervals of quiet reading that she came into possession of her hands,” which “came between her and the world of women” (1: 283). Miriam views her hands as masculine, so they serve as a bodily signifier of that which differentiates her from other women. The language she uses to describe her hands is language of strength, as she sees hands that “when the two were firmly interlocked they made a pleasant and curious whole, the right clasping more firmly, its thumb always uppermost, its fingers separated firmly over the back of the left hand palm, the left hand clinging, its fingers close together against the hard knuckles of the right” (1: 283). She identifies more with her right
hand, which she sees as “larger… kindlier, friendlier, wiser” than her left, which is “less reassuring… narrower, lighter… more flexible, less sensitive” (1: 283). Her choice of words is interesting, as she uses traditionally masculine language to describe the hand with which she identifies, words like firmly, larger, wiser, hard, but her left hand is described in traditionally feminine terms with words like clinging and more flexible. In identifying herself in a masculine manner, she acknowledges that she wants to be treated as an intellectual and social equal, for example engaging in discussions of information in newspapers, which allowed anyone to “know as much as the men sitting in arm chairs if they chose” (1: 243), but she understands that she does not necessarily want to play a male role either, as men are “ignorant” (1: 443).

According to Elaine Showalter, female writers emerging from the Victorian era were in a position of conflict (again pointing to the aptness of insomnia as a device). Many desired, as Virginia Woolf says, to “tell the truth about [their] own experiences as a body” (qtd. in Showalter, “Killing” 340), yet found this “truth” to be perceived as “unthinkable, unspeakable, or unprintable” (Showalter, “Killing” 342). Showalter continues, “The Angel in the House commands that [this truth’s] existence should be avoided, denied, or suppressed” (“Killing” 342). Richardson, in her attempt to represent female experience through writing does not avoid “truth,” but instead creates a character who feels oppressed by expectations placed upon her because of her gender, yet still internalizes these expectations and questions her ability to successfully rebel against them. She is telling the story of a female’s struggle with repression and her internalization of repressive mechanisms.
A useful parallel example of the paradoxical female struggle with repression is present in the way in which female writers use humor to both express and comply with oppression by defining themselves through it, which assumes oppression as part of their identity. For example, Katharine Streip summarizes Jean-Paul Sartre’s argument regarding the female use of humor:

Woman, as a relative being, receives meaning through her relation with her ‘oppressors.’ Although injured by them, she is also complicitous with their injustice. She resents her status and yet she sanctions it and identifies with her oppressors’ interests. Her injury is central to how she defines both herself and him, the worm who has injured her. (119)

Viewing the female as someone not free to express her experience openly, as oppressed, and as defined, not independently, but in relation to her oppressor and his interests points to her status as that of the “other.” She is only a “relative” being, defined relationally, with the definition of female being understood as “not-male.” She is not the dominant authority in society, but becomes a subject of that authority. Maleness is the norm against which femaleness is compared. One way in which Richardson’s writing can be read, then, is as a narrative of “otherness,” as a struggle for identity against an oppressive force, but still in part determined by that force. She expresses the thoughts and feelings of a woman subjected to systematic repression; she tells the story of that repression and its effects. Yet, Miriam sees herself not only as “other” to men, but “other” to women as well, and it is her insomnia that facilitates this understanding.

As Joan W. Scott argues, while it is valuable to include non-normative viewpoints as an alternative to traditional representations of history, presenting these viewpoints as alternative, without inquiring as to how and why they came to be seen
this way, is problematic: “The evidence of experience then becomes evidence for the fact of the difference, rather than a way of exploring how difference is established, how it operates, how and in what ways it constitutes subjects who see and act in the world” (777). The danger becomes that “the evidence of experience . . . reproduces rather than contests given ideological systems” (778). Therefore, Pilgrimage should be read not only as a representation of the sciences, systems of power, and subjectivity related to being an insomniac woman, but also the ways in which Miriam comes to realize and reacts to the notion that specifically as a female, her insomnia is particularly problematic because of her femininity. She sees insomnia as a means of rebellion, but it is also important to consider against what she needs to rebel, and why she feels rebellious rather than rebelled against. Additionally, that she faces corrective measures shapes her identity, and, therefore, influences the way in which she views the world. Her identity and worldview are both colored by her status as an insomniac female. Miriam does not just experience insomnia; she experiences insomnia as a woman. This experience takes on a dialectical paradigm: her experience of insomnia shapes her identity, which then shapes her experience, which further influences her sense of identity, and so on.

In Wells’ The Soul of a Bishop, Scrope, like Miriam, has a similarly bodily experience of insomnia that allows him to express anxiety over his role in society. Early in the text, Wells gives a description of the physical and mental conditions surrounding Scrope’s insomnia:

Immediate trouble arose from his loyalty [to the King]. He had followed the King’s example; he had become a total abstainer and, in addition, on his own account he had ceased to smoke. And his digestion . . . was deranged. He was suffering chemically,
one of those nameless sequences of maladjustments that still defy our ordinary medical science. It was afflicting him with a general malaise, it was affecting his energy, his temper, all the balance and comfort of his nerves. All day he was weary, all night he was wakeful. He was estranged from his body. (6-7)

Scrope’s body is a political entity, and as a result of using it to make a political statement (support the King), he places himself in a state of conflict, resulting in insomnia. Scrope uses his body to support the existing order and tradition; whereas Miriam uses her body to defy it. Both attempts result in sleeplessness, yet Miriam relishes her sleeplessness while Scrope, at least here, detests it. For Miriam, challenging conventions gives her a sense of power and contentment, yet for Scrope, reifying conventions leaves him feeling uneasy and ill. Miriam’s insomnia is an act of defiance, where Scrope’s is a result of conformity. Through Miriam’s insomnia, she becomes more familiar with her body and comes to understand it better, but for Scrope, his insomnia initially causes him to be “estranged from his body.”

Part of this explanation for the disparity of bodily reactions comes through the characters’ oppositional social stances. Miriam welcomes a change from older ways of being and defining femininity. Yet, Scrope is a conservative. Accordingly, the time frame during which The Soul of a Bishop takes place is extremely relevant. The text, published in 1917, spans the early years of World War I. Modris Eksteins argues, “the British looked on [the war] as a struggle to preserve social values, precisely those values and ideals which the prewar avant-garde had so bitterly attacked: notions of justice, dignity, civility, restraint, and ‘progress’ governed by a respect for law. For Victorians and even the mass of Edwardians, morality was an objective matter” (118). Miriam, whose story takes place before the war, is one of the
attackers of those values, but Scrope is much more conservative. Scrope’s desire to follow the model of the King, and by doing so show both his restraint and morality, points to this desire to return to the ways of the past. However, his adverse physical reaction to his political and spiritual attempt at conservatism points, through the consequence of his insomnia that will result in the changes in perception he experiences, to his initially unconscious awareness of the futility and ultimate failure of such conservatism.

Bowen also presents insomnia as an act of political expression and expression of gender roles through the body. One can see such a treatment of insomnia in a scene in which multiple characters, male and female, within the same household experience insomnia simultaneously. Francie and Hugo, a married couple visiting the Naylor’s country home where the bulk of the action of the text takes place, both lie awake in bed together, but maintain their separate experiences of insomnia through their gender roles. Bowen writes about the couple’s experience: “till well on into the night they lay beside each other under the darkness in an intent and angry silence” (151). When Francie breaks the silence, Hugo’s response is angry: “Look here, if you can’t sleep you’d better take something” (151). Clearly, Hugo cannot sleep either, but takes on the dominant role of medical advisor, “treating” his wife, with no suggestion that he should “take something” for himself as well despite his own insomnia. He seems to believe he can handle his own insomnia, but she needs to medicate hers. Part of his anger rests with the fact that “he could not bear her to intrude upon his wakefulness” (151), indicating his desire to dominate the time and space of their shared insomnia. Bowen continues, “Whichever way he turned in that
mournful freedom—and the perspectives of his regret opened fanwise, profound avenues, each white at the end with a faceless statue—she would come stumbling after him, hand to heart. ‘Try and sleep,’ he said, and sent her away angrily” (151-52). In his state of insomnia, which he views, like Miriam as a form of freedom, he is also encumbered by his role as “leader” of the family. Based on his reaction to Francie, he resents this role and wants her to stop “stumbling after him.”

Francie has her own experience of insomnia, also clouded by gender, expressed through her body:

She feigned sleep rigidly, hardly bearing to lie there. Her mind clenched tight, like a fist, at the isolation of this proximity. She longed to resume the life of day downstairs in the empty rooms. She had lain awake in the South of France hearing palm trees creak in the gritty and dry wind, hooked-back shutters rattle against the wall; she had lain awake in town with her room a battle of lights through the thin blinds, lights like her thoughts flashing and crossing—But across this battle-piece, under the long lances, had swarmed, like Uccello’s roses, small comforts, the tenderness of imagined contact. She had wept because he was not with her. Now a nostalgia for that solitude, for a wall so patient and smooth to the reaching hand where there was now a sleeper, came on her, quenching tears. He thought she slept.

In this passage, we see an example of woman as a “relative being” as described by Streip earlier. While Hugo’s insomnia is not because of Francie, but rather in spite of her, Francie sees Hugo as central to her insomnia. During her insomnia, she attempts to control her body, by remaining rigid in bed and pretending to sleep, in order to pacify Hugo, where he makes no such adjustments for her. She also uses her body, and its rigid position, to deceive him, to make him feel as though she is sleeping and he has his isolation, but in truth, he does not. So, her insomnia becomes a source of power over him, allowing her to observe him without his awareness. Further, while her earlier bouts of insomnia were nostalgic, in her ability to think of Hugo
pleasantly, her current insomnia is much less so because of his proximity. Isolation in proximity is much more painful, for her, than isolation with separation because it reveals the true extent of her emotional distance from her husband, which was previously masked by spatial distance. Most significantly, while he attempts not to think of her during his insomnia, during her insomnia, she willfully thinks only of him, but does so through her remembrances of past insomnias.

Aside from mutual resentment of their positions within the marriage, the insomnia of both Francie and Hugo is retrospective; both think of the past. During his insomnia, Hugo thinks of “regret,” which inevitably comes from past actions, as one cannot think with regret on what has not yet been done. Francie’s insomnia is not filled with regret from her past, but happier memories of missing her husband (somewhat ironically); if anything, her past becomes part of her lament over her present. A third character in the household experiences insomnia on that evening, which is also focused on thoughts of the past. Bowen writes:

Laurence could not sleep either. There must have been something at dinner. . . . He lit a candle, blinked at the startled flame and blew it out again. Darkness resumed, with an uncomfortable suggestion of normality. There seemed proof that the accident of the day, of action, need not recur. And from this blank full stop, this confrontation of a positive futurelessness, his mind ran spiderlike back on the thread spun out of itself for advance, stumbling and swerving a little over its own intricacy. He caught trains he had missed, rushing out to the boundless possible through the shining mouths of termini, re-ordered meals in a cosmopolitan blur, re-ate them, thought of thought but sheered away from that windy gulf of a fateful clapping of empty book-covers. Far enough back, in a kind of unborn freedom, he even remade marriages. (152-53)

Food is a recurring motif throughout Bowen’s text, used to contrast the ordinary, everyday elements of life with the political and social turmoil of the society the text
describes (related to both the aftermath of World War I and the persistent, recurring conflict between the British and Irish). Food becomes a primary motif through Laurence’s insomnia, as he first remembers “something at dinner” causing his insomnia, then envisions the ordering and eating of meals he might have had. Food is, in fact, one of the most frequently cited medical causes of insomnia by physicians from this time period, as we see both in this text and in Wells’. For example, an article written in 1925 argues that “It was not to be forgotten that insomnia, especially in the shape of morbid sleep, was frequently caused by toxic states of the blood—for example, such as might be due to abnormal functioning of the digestive system” (Hutchinson 776-77). Disrupted eating leads to disrupted sleeping.

Even more important to Laurence’s insomnia is its backward movement, with his mind running “spiderlike” through the past that led him to his present state. Laurence’s insomnia, much like Hugo’s from earlier, is a state from which he can imagine control over others, using his insomnia to envision series of events that he authorized, but only retrospectively. Further elaborating on this theme of authorship through insomnia is the way in which his insomnia shifts from his own thoughts to the imagined thoughts of another, female, character, who is no longer present:

And alarmed by the dragging tick of the watch at his pillow, slowing down as the mortal sickness of Time, he turned over and thought in a fury, he could not think why Laura should have married Mr. Farquar. . . Her confusion had clotted up the air of the room and seemed, in that closest darkness under the ceiling, to be still impending. Here, choked up under the sweep of the bed curtains, she had writhed in those epic rages, against Hugo, against Richard, against any prospect in life at all; biting the fat resistant pillows until once she had risen, fluttered at her reflection, dabbed at her eyes, buttoned a tight sleek dress of that day’s elegance over her heaving bosom, packed her dresses in arched trunks (that had come back since to rot in the attics)
and driven off, averting from the stare of the house an angry profile. (154)

Through his insomnia, which brings attention to the delayed movement of time as well as to the past, he authorizes Laura’s own insomnia, imagining her in a neurotic state, rebellious against her marriage and life. As he imagines Laura’s insomnia, he also imagines her body, with visions of her “tight sleek dress” and “heaving bosom.” The reason he gives for Laura’s marriage, “confusion,” is really his own confusion, projected onto her. He also gives Laura’s imagined insomnia a physical component, through his use of terms like “clotted,” “choked,” and “writhed,” indicative of her alleged “confusion” and frustration displayed through her body. Not only does he authorize Laura’s behavior and motives, he authorizes her body as well, controlling it in a way similar to that of Hugo as he suggests his wife take sedatives to treat her sleeplessness. Laura is not within reach or control of Laurence, but through his ability to imagine her, he can imagine control over her as well.

Lois Farquar, product of the marriage between Laura and Mr. Farquar, is a young ward of the Naylor family coming of age in the time following World War I, who expresses a sentiment regarding her femininity similar to that of Miriam, and does so through a discussion of insomnia. In a conversation with her friend Marda, who was recently engaged to be married, Lois expresses skepticism of gender roles and discomfort with her unstable social position, related to her status as ward, but complicated by the fact that as a woman, her ability to establish herself independently is limited. Lois states that she would “like to be related; to have to be what I am. Just to be is so intransitive, so lonely” to which Marda replies, “Then you will like to be a wife and mother. . . . It’s good thing we can always be women” (142). Lois is
searching for a stable place in society, as she is currently in a liminal and volatile social position. However, like Miriam, Lois responds by saying, “I hate women. But I can’t think how to be anything else. . . . But I wouldn’t like to be a man. So much fuss about doing things” (142). Lois, like Miriam, sees herself as trapped between two genders, desiring full identification with neither, but instead wanting to establish her own category. She seems to desire the independence associated with masculinity, the ability to not rely on her adoptive family and have to meet their demands and expectations, but does not want to deal with the “fuss” associated with being a man either; she makes men appear petty, and almost effeminate, where Miriam characterizes them as “ignorant.” Lois expresses, also like Miriam, a desire to go abroad, but has thus far been prevented from doing so “because of the War” (142). Ultimately, what Lois wants is to escape conventional gender roles and political subjectivity, which she links to the war. Bowen writes, “She wanted to go wherever the War hadn’t. She wanted to go somewhere nonchalant where politics bored them, where bands played out of doors on hot nights and nobody wished to sleep” (143). Insomnia becomes an escapist fantasy. Despite the many similarities between Lois and Miriam expressed in this passage, the final statement indicates a differentiation between them. Miriam’s insomnia is an act with political implications, enabling her to integrate into and occupy traditionally male spaces. Lois has a different vision of insomnia, as apolitical. Where Miriam’s insomnia is integrative, allowing her to extend her role to academic and social realms outside of the domestic sphere, Lois depicts insomnia as a direct means of avoidance of the political. The implication is that politics and the war make people want to sleep, perhaps in an effort to escape
consciousness for a time, again an expression of conflict through the body. She envisions insomnia as a new form of escapism, where sleep as escape is no longer a necessity. But, being apolitical through the desire to avoid politics, is, to an extent, a political act. She is calling for a conscious dismissal of politics and the war through extended consciousness itself.

Miriam’s insomnia as a political act, aside from simply giving her time and space to consider and defy the limitations placed upon her because of her gender, entails her ability to use her insomnia to explore spaces beyond the domestic realm, the space traditionally relegated to women. She seeks to inhabit traditionally male spaces physically, through walking around the city and visiting tea houses and restaurants, which she frequently does at night. Scott McCracken writes of teahouses as a space where she can transcend gender:

> In the early chapter novels of *Pilgrimage*, the ABCs [teahouses] allow her to be similarly “amphibious,” when they act as staging posts or thresholds between her private room in the boarding house and the public life of the city. In this context, the café not only allows “private behavior in a public place,” but, between her room and the street, it is a space where public and private meet. As such, the chain teashop is a productive space, the narrow stage upon which Miriam can perform a new kind of gendered subjectivity, which is neither conventionally masculine nor feminine. (133)

Miriam uses her nocturnal walks as a means of inhabiting public and private spaces. The urban site of her wanderings, especially in the chapter novel *Clear Horizon*, just prior to her departure for her rest cure, comes to represent her growing confidence and desire to exert independence, and she becomes someone who “had dared to venture alone, driven by cold and hunger, into the mystery of a London restaurant just before midnight” (4: 329). Peter Baldwin notes that nocturnal urban wanderings
presented an especial danger to women of the nineteenth century, who had “no safe way to travel through the city at night without a man’s protection” and in doing so faced “the possibility that something very unpleasant could happen to [them]” (152). As society modernized and the streets became increasingly safer for lone women, their sense of freedom increased. Miriam’s nocturnal walks reflect her sense of confidence and a break from older insecurities. In addition, her late night walks represent Miriam’s adaptation into a modernizing and rapidly urbanizing society.

**Insomnia and Urban Spaces**

Georg Simmel argues that the fast pace and rapid movement of life within the metropolis “promoted a highly personal subjectivity” (414). Simmel’s argument is reflected in the following passage relating one of Miriam’s nocturnal walks:

> [She] swiftly crossed the wide, empty roadway, feeling as she reached the far, opposite pavement, which was still just within the circle of her London homeland, strength to walk, holding back thought, on and on within her own neighbourhood until, stilled by the familiar presences of its tall grey buildings, and the trees detachedly inhabiting its quiet squares, the inward tumult should subside and leave her to become once more aware of her own path, cool and solid beneath her feet; so that when presently she encountered Amabel, the events of the long evening, if, by that time, in her own mind, they were already irrelevant and far away, might be left, by mutual consent, shelved and untouched until they should come forth to fulfill, one by one, their proper role as lively illustrations for the points of intensive colloquies. (4: 337)

Through her nocturnal walk, she had “become more aware of her own path,” she is “within her own neighborhood,” and she can control the thoughts “in her own mind.” The repeated use of the possessive “own” reiterates her feelings of ownership, over her mind, body, and surroundings, leading to the “highly personal” sense within this passage. Her late night solitude in the urban setting allows her to repossess herself, allowing her to pursue her own path and control the dissemination of knowledge.
about herself, both to herself and to her friend. She uses her walking to cross new boundaries, both physical and mental. Commenting on the function of boundaries in urban spaces, Walter Benjamin writes, “The city is only apparently homogenous. Even its name takes on a different sound from one district to the next. Nowhere, unless perhaps in dreams, can the phenomenon of the boundary be experienced in a more originary way than in cities” (88). The idea of the boundary is important within this passage, as Miriam’s mind is only quieted once she is “within the circle of her London homeland” upon crossing the street to her familiar territory. Both authors acknowledge urban exploration as a means of interpreting subjectivity. For Simmel, this subjectivity is individualized, as the individual is forced to distinguish himself from the chaos of the metropolis. For Benjamin, urban life stretches the boundaries of the self, making the subject aware of heterogeneity and connectivity.

Miriam’s experience of urban wandering can be said to have both functions and allow her to gain control over her subjectivity through resisting traditional roles and expectations. In her argument regarding humor in the literature of Jean Rhys, Streip argues that women are not traditionally seen as funny because “it is difficult to identify with them as subjects. How can women be recognized as separate in their narcissism if they are valued for their nurturing, if they are experienced as someone ‘related to’ rather than identified with?” (124). Ultimately, Miriam’s insomniac wanderings, a result of her initial use of sleep time as time for self-exploration, allow her to cultivate an independent identity, as someone capable of narcissism, of putting the self first, rather than as someone “identified with” or through the role of caretaker (one is never just “caretaker,” but always caretaker of something or someone),
escaping this role through taking her rest cure abroad, and these walks also allow her to explore her place within the city, which affords her confidence. She is connected to her environment and takes power from that connection. Throughout Pilgrimage, Miriam struggles with and comes to resent the position of caretaker, and her insomniac practices directly influence her rejection of Victorian female stereotypes.

Lois Cucullu, in an argument about the Victorian novel of insomnia and somnambulism, argues that “The intrusion of these texts into nightly sleep coheres with the intrusion occurring around the city into its nocturnal hours” (306). One example Cucullu utilizes is Bram Stoker’s novel Dracula, which “concerns the female body's internalization of overstimulation and modern restlessness in which the next result has everything to do with sexual modernity and even perhaps with . . . metronormativity” (304). Novels such as Dracula exhibit a sense of anxiety over a world which allows for increasing amounts of female independence, similar to Mitchell placing blame on industrialization for a heightened amount of cases of nervous hysteria among women (Bassuk 250). Women were indeed breaking circles, but they were breaking the circles of routine to which Miriam fears awakening rather than breaking circles of “disorder” resulting in a renewal of their domestic duties. William James argues that “what is called our ‘experience’ is almost entirely determined by our habits of attention” (Habit 172). He raises the point that to which we choose to attend creates our experience. Miriam displays a shift in her attention, fostered by her ability to use the privacy and space of sleep time, to better understand herself as a subject and expose and resist her assigned subjectivity to create an independent subjectivity rather than a relational one.
Like Miriam, Scrope’s experience of urbanity influences his subjectivity. He ponders God as he walks around London: “He no longer felt that God was in Pall Mall or St. James’s Park, whither he resorted to walk and muse. He felt now that God was somewhere about the horizon…” (92). Wells continues, “The world had become opaque and real again as he walked up St. James’s Street and past the Ritz. He had a feeling that he was taking the afternoon off from God” (92). To this point, the bishop was overwhelmed by his new sense of God, yet his urban experience provides him with some relief and he is able to feel a renewed sense of stability. Simmel argues:

The metropolitan type of man . . . develops an organ protecting himself against the threatening currents and discrepancies of his external environment which would uproot him. He reacts with his head instead of his heart. . . . Intellectuality is thus seen to preserve subjective life against the overwhelming power of metropolitan life” (410).

Scrope’s urban walks return him to a more intellectual understanding of God, but the effects are only temporary, as “All the relief and benefit of his experience in London had vanished out of his life” (116) after he leaves the city.

**Insomnia as Resistance**

One final example of Miriam’s insomnia as a response to gender roles is exposed through a discussion she has with Hypo Wilson, Richardson’s character based on Wells. Hypo views her insomniac tendencies as indicative of childishness and irresponsibility. He interrogates her with regard to her sleep habits, asserting that she “ought to sleep” (4: 319). “Sleeping only at dawn,” Hypo continues, “is a not a habit to be cultivated” (4: 322). In this passage, Hypo patronizes Miriam, asserting masculine authority over her pursuit of individuality (and possible rejection of motherhood), but also over the way in which she chooses to use her body. Hypo puts
his comments in medical terms, echoing the language of child rearing literature, such as that by physician L. Emmet Holt, who writes that “quiet and peaceful sleep is a sign of perfect health” (120). Holt continues, “Disturbed sleep or sleeplessness may be due to causes purely nervous. Such are bad habits acquired by faulty training” (120). Habit, according to James, involves paths which are formed within the body and mind, enabling one to repeat the same task with increasing efficiency (Habit 8-10). However, even though habits can be cultivated for useful purposes, they can also be harmful: “Many so-called functional diseases seem to keep themselves going simply because they happen to have once begun. . . . Epilepsies, neuralgias, convulsive affections of various sorts, insomnia are so many cases in point” (10). Curing these disorders merely involves a disruption of the habit through means such as medication (James, Habit 10). James essentially presents the same view of nervous diseases as Hurry does, only James sees as habit what Hurry sees as a component of a vicious circle. Both agree that in order for a habit to be broken or a disease to be cured, invention and disruption of the cycle is necessary.

This philosophy of disruption of habit as cure is reflected in Hypo’s language when he speaks of Miriam’s willful insomnia as “not a habit to be cultivated.” According to his logic, the more she gets into the habit of insomnia, the more difficult it will be for her to break this habit when she is required (through becoming a wife and mother) to follow a more regularized schedule. Miriam’s interests at this point do not include marriage and motherhood, so she views Hypo’s comments as an affront to the identity she has cultivated (rather than the habit): “Surprised and stung by the sudden, public discrimination, by its implied . . . repudiation of the envy and
admiration he had so often expressed in regard to her own independence of sleep and food, she forced herself to concentrate on his question” (4: 319). Unlike both Laurence and Scrope, she does not blame her insomnia on her diet, and sees herself as “independent” with regard to food. She understands Hypo’s comments about her sleep habits as reflective of his view of her as destined for motherhood, as he believes all women should be: “‘You, Miriam,’ ran his message, ‘booked for maternity, must stand aside, while the rest of us, leaving you alone in a corner, carry on our lives’” (4: 321). This same combination of science with a narrow conception of femininity centered on the role as mother and nurturer expressed by Hypo is similar to Mitchell’s presentation of hysteria as a disease of body, mind, and morality. Hypo, through his counsel, is attempting to direct Miriam to her “proper” role in life, just as Mitchell saw it his duty to not only cure his patients physically and mentally, but serve as their moral counselors (Mitchell 62).

However, this conversation between Miriam and Hypo is not simply a representation of his assertion of power over her, but also illustrates the power which Miriam is able to utilize through her exposure of and resistance to his expectations of her. She understands the role she is supposed to embrace, but willfully refuses to do so. When speaking with Hypo about familial devotion, she says:

You may call the proceeding [devotion] by any name you like, choose whatever metaphor you prefer to describe it—and the metaphor you choose will represent you more accurately than any photograph. It may be a marvelous incidental result of being born a woman and may unify a person with life and let her into its secrets—I can believe that now, the wisdom and insight and serene independent power it might bring. But it is neither the beginning nor the end of feminine being. It wasn’t for my Devon-border grandmother who produced twenty-two children. (4: 331)
She sees the ability to be devoted, as a wife or mother, as part of her identity, but not as the main or only part of her identity. Further, she understands that other women have felt this way before her. Hypo becomes bored by this line of discussion and loses interest in her comments, but through the rejection of defining herself in terms solely based in relation to those she cares for, she is exercising a form of power. She is also judging his reaction to her comments and expectations of her. In doing so, she is rejecting an assigned identity.

Hypo views Miriam as a biological entity, a woman destined for motherhood, but through her insomnia, Miriam rejects this classification as the primary motivator of her character. Miriam has a conflicted view of medicine and science, ultimately taking advantage of this scientific/biological view of herself to escape the ramifications of this perspective. In the penultimate chapter novel, *Dimple Hill*, Miriam expresses both her skepticism of science as well as her desire to take advantage of it, thinking of her supposed “rest cure” as an element of her “newly dawnsed determination to exploit, for the sake of its attendant possibilities, the verdict of a science she half despised” (4: 443). The *Pilgrimage* series parallels Miriam’s approach to science and medicine through its inclusion of scientific and medical discussions that reflect contemporaneous medical belief with the intent of exposing and challenging the limitations of such a model for understanding behavior and character. In some cases Miriam’s thought underscores scientific thought, yet there is always an element of skepticism and cynicism directed towards these reflections. For example, illustrating Miriam's simultaneously moral and medical characterization of
insomnia yet ultimate skepticism towards it, she refers to her insomnia as “a vicious circle,” as I have discussed earlier.

As *Pilgrimage* continues, Miriam comes to equate her behavior, including her insomniac tendencies of exploration, with the perpetuation of hysteria, and views this “hysteria” as directly related to her dissatisfaction with limitations and expectations of her because of her gender, often expressed as and through insomnia. Stacey Fox writes that Miriam reads an article on the “lymphatico-nervous” class, a class in which Miriam tentatively places herself:

> In assuming the role of diagnostician, Miriam reads her life through the diagnostic framework provided by the article, and “all she had suffered in the past,” the trauma of her mother's death, her inability to fit in with other people, her dissatisfaction with conventional feminine roles, her restlessness and her search for a productive feminine identity, come to stand as symptoms of her lymphatico-nervous disorder. The classificatory model is not explicitly gendered, but the symptoms of the “lymphatico-nervous class”—“no energy, no initiative, no hopefulness, no resisting power; and sometimes bilious attacks”—recall the symptoms of her mother. (Fox 79)

Through her identification with the symptoms described in this article, she is “interpellated into this scientific model and, as a result, can only register her life in pathological terms” (Fox 79). At this point, Miriam has internalized the discursive views of feminine weakness and incapability of handling insomnia. Even as Miriam attempts to rebel against the idea of the female as weak, she comes to fear that her insomnia may, in fact, lead to a nervous breakdown because of her alleged weakness (Fox 80). Miriam registers the causes of her insomnia, restlessness and dissatisfaction, as well as its results like lack of energy and initiative, as possible indicators of hysteria.
Hurry, like Miriam, sees insomnia as an integral part of vicious circles of neurasthenia (2), especially as related to what he calls the “habit” subset, which entails an “exaggerated reflex irritability of the nervous system” (3). Insomnia, which is often accompanied by “depression and malnutrition” (8), intensifies neurasthenia, acting as an “obstinate complication” (6). Hurry argues, “Insomnia also plays a large part in the causation and perpetuation of insanity” because it strains the nervous system (13). It forms a part of a vicious circle: “Neurasthenia may cause insomnia which intensifies neurasthenia” (236). Since not sleeping becomes part of the circle of disease, sleep, then, is a way of disrupting the circle: “Sleep is another of Nature's methods of breaking Circles, especially in neurotic disorders which are complicated by insomnia” (243). This text illustrates a discursive view of insomnia as both cause and symptom of psychological disorder, and sleep as a possible remedy for psychological disorder because it breaks the circle of sleeplessness. Hurry’s theories correlate with Miriam’s fears about the relationship between her behavior and her habits and decisions.

Miriam’s understanding of the relationship between her sleep habits and her ostensible propensity for psychological collapse is further intensified by her mother’s relationship to sleep. Towards the end of Honeycomb, Miriam’s mother suffers a nervous breakdown, which eventually leads to her suicide. Miriam and her mother both cite lack of sleep as one of the major factors in Mrs. Henderson’s psychological disintegration, as Miriam thinks, “‘Dr. Ryman is giving her bromide . . . she can't sleep without it.’ Sleeplessness, insomnia . . . she can't see the spring . . . why not?” (1: 475). The passage continues, “… bottles of bromide, visits, bills, and mother
going patiently on, trusting and feeling unhelped. Going on. People went . . . mad. If she could not sleep she would go . . . mad….“ (1: 475). Both Miriam and her mother equate sleep with a relief from the mother’s disorder; sleep provides a respite from the mother’s tortured consciousness, which Fox interprets as a result of her being “progressively ground down by the misogynist Mr. Henderson, leading to the hopelessness which caused her death” (79).

Mrs. Henderson’s illness and treatment closely resemble that of hysterical patients under the care of Mitchell. Just as Mitchell asserts the complete authority of the doctor to make decisions for the patients and establish complete dependence of his patients, Mrs. Henderson is “‘in Dr. Ryman's hands.’ Dr. Ryman is treating her. Mrs. Poole said Dr. Ryman was a very able man” (1: 475). Miriam doubts Dr. Ryman’s ability to understand his mother's condition, asking, “how did he know more than anyone else?” (1: 475), yet her mother allows the treatment to continue, despite its ineffectiveness. In addition, just as Mitchell suggested hired nurses because family members would give in to the selfish patient’s whims (49), the Hendersons are encouraged to “behave as if there was nothing wrong with her” because “there is nothing wrong but nerves” (1: 475), indicating a dismissal of nervous disorders as “real” conditions. Further resembling Mitchell’s thoughts on his patients, Mrs. Henderson’s illness is expressed as having an element of selfishness, her cure requiring her to “forget about herself” (1: 475).

Just before Mrs. Henderson’s suicide, Miriam attempts to stay awake at night to nurse her mother. She is very conscious of her mother’s inability to sleep, as she, herself, struggles to stay awake: “She read on till the words flowed together and her
droning voice was thick with sleep. The town clock struck two. A quiet voice from
the other bed brought the reading to an end. Sleep was in the room now. She felt
sure of it” (1: 487). The belief that her mother is able to fall asleep allows Miriam to
sleep herself; however, the relief is only momentary, and she awakens to her mother
having a hysterical fit. She again brings her mother to the doctor, but again, his
treatment is futile. On their way home, Mrs. Henderson says, “‘God has deserted me’
. . . ‘He will not let me sleep. He does not want me to sleep. . . . He does not care’”
(489). Shortly thereafter, Mrs. Henderson commits suicide. In this passage, her
language reflects her thoughts both that her insomnia perpetuated her psychological
disorder, but also that it had moral implications. She felt punished by God, perhaps
as a result of her failure to adequately play her part as wife and mother. Ellen Bassuk
suggests that female hysteria is rebellion against being forced into and constrained by
the role of caretaker, wife, and mother; the hysterical woman refused to fill the role
and required others to care for her instead (253). Mrs. Henderson appears to be aware
that her hysteria has a rebellious component to it; however, she also has internalized
the legitimacy of the role she was supposedly intended to fill and feels guilt at her
inability or refusal to do what is expected of her.

A character similar to Mrs. Henderson, who provides further insight into
insomnia as a symptom of a conflicted sense of expectations of femininity, is Rhys’
semi-autobiographical character Sasha Jensen, who appears in her text *Good
Morning, Midnight*. Sasha, who was at one point married with a child, was
abandoned by her husband and lost her child prior to the main action of the novel.
Though Mrs. Henderson still has her husband and children around her, her situation is
similar to Sasha’s in that both women are unable to fulfill their wife and mother roles. Also like Mrs. Henderson, Sasha is extremely tortured mentally, and her depression manifests as an inability to sleep. Sasha, unable to cope with her insomnia, repeatedly resorts to a nightly combination of alcohol and Luminol in an effort to make herself pass out. She has no tolerance for insomnia, as Miriam does. For instance, Rhys, in a first person presentation of Sasha’s thoughts, writes, “I could not sleep. Rolling from side to side. . . .” (12). This time of insomnia reminds Sasha of her past, in which she remembers her marriage to Enno, but her memories are soon overtaken by the ugliness of her environment, a dingy hotel room in which she imagines insects crawling on the walls around her.

Sasha quickly gets out of bed, and she takes a second dose of Luminol, which allows her to sleep immediately (13). This instance is only one of many in which Sasha uses Luminol to sleep, sometimes staying in bed up to fifteen hours a day (86). She would much rather sleep than be tired because when she is tired, “everything is like a dream and you are starting to know what things are like underneath what people say they are” (121). For Sasha, as for Miriam, being awake for too long allows for exploration and revelation. However, unlike Miriam, Sasha does not like what she learns; it leaves her feeling frightened rather than empowered. Both women realize the artifice behind the way in which people behave, but while Miriam decides to challenge what people expect of her and the way in which they judge her, Sasha shrinks from their judgment and becomes increasingly unable to handle the pressures of social encounters, knowing that she has failed to fill the role for which she is marked. Sasha and Mrs. Henderson present two examples of characters who
internalize the discursive presentation of females as destined for marriage and motherhood, but also of females as inherently weak and unable to handle the excess of thought insomnia brings.

Miriam, however, is different from Sasha and Mrs. Henderson. Ultimately, Miriam is cynical about the way in which the doctors treated her mother and the role for which others feel she is destined. Instead she exhibits a “refusal and appropriation of the power relations embedded in the medical diagnosis” (Fox 93). For example, after a consultation with the doctor Ashley Densley, she thinks:

In the stupor of relief that fell upon her, relaxing the taut network of her nerves and leaving her seated as of old, infinitely at ease and at home within the friendly enclosure, she waited for his facts, the ‘medical facts’ she had for so long scornfully regarded as misreadings of evidence isolated from the context of reality, inertly going their way until another group of facts, equally isolated from reality, brought about a fresh misreading. But the facts she was now to hear, drawn from the real of Sarah’s being regarded from the point of view of Sarah who, in spite of her experiences, still unconsciously endowed all specialists with omniscience, would carry conviction borrowed from hope that Sarah’s faith might introduce a power that would carry all before it. (4: 373-74)

Not only does she recognize any diagnosis Densley might proffer as inaccurate and based upon misinterpretation of her character, she sees a possible source of power that might come from his diagnosis. By putting “medical facts” in quotation marks, she expresses her skepticism, further enhanced by what she sees as the inevitability of his “misreading” of her condition. She also distinguishes herself from Sarah, who takes the word of physicians without question.

Consequently, Miriam comes to regard her chosen insomnia not as an act of selfishness, but as an independence and individuality—at time for exploration and an opportunity for freedom. She regards sleep similarly to the way in which Richardson,
who refers to sleep as a “nightly task” (qtd. in Marcus 65) does. Richardson views sleep not as an escape from one’s life, but rather as chance for renewal and understanding: “Richardson would express a resentment of the use of the day in the service of the night (as opposed to sleep serving to renew the self for the day)” (Marcus 64). In her response to a book by H. A. Foster, entitled Studies in Dreams, Richardson claims that she perceives dreaming and dream analysis as “wasting time” (qtd. in Marcus 63). Conversely, an ideal function of the dream and sleep time would be not to provide an escape from consciousness but to provide “a direct consideration of things as they are, undisturbed by the sense of time and place, and sometimes of an undisturbed consideration of all that we are” (qtd. in Marcus 64). Richardson, like Lois Farquar, does not view sleep as a respite from the self as Mrs. Henderson and Sasha do, one both of them want desperately; rather Richardson wants to make use of sleep time for uniting the past and present self in order to better understand our own consciousness (Marcus 65).

Much like Pilgrimage, Wells’ The Soul of a Bishop both mirrors and exploits scientific and medical discourse regarding the relationship between sleeping and mental hygiene. Both texts use the scientific and medical disciplines against themselves. For example, in describing Scrope’s first experiences with insomnia, Wells gives both personal and medical justifications:

The night after his conversation with [his daughter] Eleanor was the first night of the bishop’s insomnia. It was the definite beginning of a new phase in his life.

Doctors explain to us that the immediate cause of insomnia is always some poisoned or depleted state of the body, and no doubt the fatigues and hasty meals of the day had left the bishop in a state of unprecedented chemical disorder, with his nerves irritated by strange compounds and unsoothed by familiar lubricants, and the core and
essence of his trouble was an intellectual distress. For the first time in his life he was really in doubt, about himself, about his way of living, about all his persuasions. (34)

Wells incorporates two different causes of the bishop’s insomnia; the first is the consequence of a conversation with Eleanor in which she discusses her desire to pursue education outside of the household. Her desire for independence leads him to question his own motivations and position within the Church. The second reason given for Scrope’s insomnia is some sort of chemical imbalance combined with working long hours, which he associates, like Laurence (but unlike Miriam) with food. The explanation given in the text, a chemical disorder in combination with overwork and poor diet, was, in fact, in accordance with popular theories on insomnia from the time period of the text. Regarding overwork, an article written in 1900 by physician James Sawyer explains that overwork alone is not enough to account for insomnia: “I advise you to be wisely suspicious as to accepting work as a cause of insomnia. Nature provides that disposition to rest shall follow work. It is mostly worry, not overwork, or it is work under wrong conditions which brings unrest” (1628). Sawyer’s passage is suggestive in that, as the text proceeds, we come to learn of the dissatisfaction Scrope has with his job. However, as both Sawyer and Wells seem to contend, overwork alone is not enough to cause insomnia, which Wells clearly indicates through positioning the beginning of Scrope’s insomnia after his worrisome conversation with his daughter, rather than simply as a cause of his work.

With regard to the idea of chemical imbalances, one common explanation for insomnia is an imbalance of blood in the brain. As one of Scrope’s doctors, Dr. Dale, argues, “My theory about your case is that this [kidney trouble brought on by
drinking local water] produced a change in your blood, quickened your sensibilities and your critical faculties just at a time when a good many bothers . . . came into your life” (73). Dale suggests a combination of physiological and psychological factors. With regard to the importance of blood flow and sleep, MacFarlane asserts that there is a correlation between insomnia and changes in blood distribution:

As the causation of sleep from the earliest times has been supposed to depend in some manner upon alterations in the blood-supply of the brain, it will be useful to consider preliminarily some points in connection with these vascular arrangements, more especially as the cause of so many forms of insomnia is to be found in some interference with the normal blood-supply, either as regards quantity or quality, or both combined. (11)

As discussed earlier in this chapter, Scrope, at least in part, attributes his insomnia to his recent decision to emulate the model of the King, and abstain from tobacco and alcohol, referring to the fact that his nerves were “unsoothed by familiar lubricants.” Scrope appears to believe that part of the cause of his insomnia is an imbalance created by his change of habits and his doctor adds contaminated water to the equation, but also acknowledges the “bothers” he is facing. Wells uses all of these factors in combination—the bishop’s discomfiture with his daughter’s desire for education and independence, his growing misapprehensions regarding his job, and his attempt at the politicization of his body as a conservative reaction to social change—to create a medical and psychological basis for the bishop’s insomnia. As Wells puts it, “this intellectual insecurity extended into his physical sensations” (35). His use of conditions reflected in the medical literature of his time period contextualize Scrope’s insomnia to make it relevant not only to his personal experience, but his social and historical experience.
Interestingly, Scrope’s insomnia is also rooted in gender conflict. Wells writes:

It was not only that the world of his existence which had seemed to be the whole universe had become diaphanous and betrayed vast and uncontrollable realities beyond it, but his daughter had as it were suddenly opened a door in this glassy sphere of insecurity that had been his abiding refuge, a door upon the stormy rebel outer world, and she stood there, young, ignorant, adventurous, ready to step out. (35)

In the conversation with his daughter that sparked his mental unrest, he is disturbed by her desire to “find out for [herself] what all this trouble about votes and things means” (32). Further, she hopes for an education outside of her home: “I would like to go to Newnham or Somerville—and work. I feel—so horribly ignorant. Of all sorts of things. If I were a son I should go” (32). He protests, and she again replies to him that “If [she] were a son, you wouldn’t say that” when he suggests she remain home and read to further her education rather than going out into the world (32). For Scrope, his daughter’s desire to be treated as a son reflects a society in collapse: “Since the passing of Victoria the Great there had been an accumulating uneasiness in national life. . . . Not that Queen Victoria had really been a paperweight or any weight at all, but it happened that she died as an epoch closed, an epoch of tremendous stabilities” (17). His ability to simultaneously assert and dismiss the importance of Queen Victoria speaks to his skepticism of the role of women in public life. On the one hand, he reflects on her stabilizing influence, but on the other, he attempts to only view her death as coincidental to the social changes that followed.

**Treatments**

At first, Scrope searches for medical, rather than existential, cures for his insomnia. Again we see contemporary theories on treatments of insomnia reflected in
the text. At first, he turns to his friends for advice: “he had now experimented ignorantly and intensely with one or two narcotics or sleeping mixtures that friends and acquaintances had mentioned in his hearing” (48), including the use of opium to which he becomes mildly addicted. More importantly, his pursuit of a treatment leads to a change in character: “For the first time in his life he became secretive from his wife” (48). Wells creates a parallel situation in which the bishop both hides his doubts about his role within the Church with his surreptitious attempts at drugging himself to sleep, as he “would have liked to discuss the perplexities in which he was entangling himself . . . but his own positions were becoming so insecure that he feared to betray them by argument” (48). He finds himself acting in a way he considers “physically and morally evil” (49). His secrecy regarding his doubts of the Church’s doctrines coincides with the secrecy of his attempts at self-medication.

Given the failure of his attempts at self-medication, which only leads to “an intensification and vivid furnishing forth of insomnia” (48), as well as “his character being undermined by the growing nervous trouble” (49), he eventually seeks the assistance of a physician, Dr. Brighton-Pomfrey, who diagnoses him with neurasthenia (71). Neurasthenia is a somewhat amorphous mental disorder used to describe a variety of mental and physical symptoms including anxiety and insomnia. According to Rankin, in an article compellingly entitled “Neurasthenia: The Wear and Tear of Life” (1903), though neurasthenia is “sometimes ill-defined and always capable of variation,” it generally “may be regarded as a derangement of function resulting from exhaustion of nervous energy” (1017). Continuing, Rankin explains that neurasthenia “attacks men more frequently than women, and is specially apt to
affect those of neurotic inheritance, or those who live under physical and mental
tension” (1107). Often, as is the case with Scrope, “the patient, who has been
indefinitely out of health for some time, is at last driven to the doctor because of this
sense of langour, to which has lately been superadded sleeplessness and impaired
digestion” (Rankin, “Neurasthenia” 1107), symptoms from which Scrope is clearly
suffering. Neurasthenia, according to Rankin, is a condition which requires both
physical and moral treatment: “rest is the first and obvious indication, and it must
always be both mental and physical. Its power for good is intensified by the moral
effect exercised on the patient by his physician and his surroundings”
(“Neurasthenia” 1019). In fact, Rankin suggests that the Weir-Mitchell treatment,
discussed earlier with regard to Miriam, “will yield the best results” (“Neurasthenia”
1019). Through the possible diagnosis of neurasthenia applied to Scrope by his
doctor, much is revealed about his situation: his nervousness and anxiety, his
frustration with his attempts at self-medication that drive him to seek medical
attention, and his sense of being morally lost and turning to a doctor (Brighton-
Pomfrey), who “prided himself on being all things to all men” (161).

Scrope is not fully satisfied with the idea of resting to cure his neurasthenia
because he has “much to do” and fears a “loss” of “practical efficiency” (71), again
indicating the relationship, as Miriam draws, between insomnia and inefficiency. His
new doctor, Dr. Dale, provides an alternative explanation of his mental condition:
“You see, the trouble in such a case as this is peculiarly difficult to trace to its sources
because it comes just upon the border-line of bodily and mental things. You may take
a drug or alter your regimen and it disturbs your thoughts, you may take an idea and it
disturbs your health” (71). Dale, explaining insomnia as a liminal condition indicating an imbalanced body and mind, continues:

But I go off from the idea that every living being lives in a state not differing essentially from a state of hallucination concerning the things about it. Truth, essential truth, is hidden. Always. Of course, there must be a measure of truth in our working illusions, a working measure of truth, or the creature would smash itself up and end itself, but beyond that discretion of the fire and the pitfall lies a wide margin of error about which we may be deceived for years. So long as it doesn’t matter, it doesn’t matter. (72)

Dale argues that something has happened to Scrope, probably fostered by his recent relocation to Princhester and its related sense of uprootedness and change in physical atmosphere, that disrupted Scrope’s “working illusions.” Dale argues that the “loosening of the ties that bind a man to his everyday life and his everyday self is in nine cases out of ten a loosening of the ties that bind him to everyday sanity” (75). In this section of the text, Dale plays both physician and psychologist to Scrope, offering a dual diagnosis of sorts. Scrope is a bit cynical of the psychological end of Dale’s analysis, dismissing it as “Phenomena and noumena and so on and so on. Kant and so forth. Pragmatism” (72), but becomes much more interested in what Dale has to say when Dale discusses a possible drug of his own invention that might be helpful. His intention is not to “[drug] oneself back to the old contentment” but to “drug [Scrope] on to the new” (76). In fact, after Scrope takes Dale’s prescription, he does experience a new sort of contentment. For example, whereas before, the war seemed infinite and hopeless, after Dale’s drug, “he saw the war as something measurable, something with a beginning and an end, as something less than the immortal spirit in man. He had been too much oppressed by it” (79-80). Dale’s drug does allow him the contentment he desires, at least for a time.
Drugs were, and still are, a common recourse for those with insomnia.

Sawyer explains:

In the severer forms of psychic insomnia we must often at once secure sleep by the action of some efficient hypnotic. I prefer opium or chloral. By the use alone of one of these drugs we can often quickly cure acute insomnia depending upon some mental shock or strain. You will find that a few nights of sound and sufficient sleep, artificially induced by the exhibition of a reliable hypnotic, will do more than anything else to restore to the brain the power of sleeping without further aid from drugs. Besides chloral hydrate, opium, morphine, and the other soporific derivatives of opium, the chief hypnotic drugs are sulphonal, trional, paraldehyde, amyylene hydrate, and the bromides, to which may be added alcohol and affusion of the head with cold water. (1627-28)

The purpose of the use of such drugs was to break the cycle of insomnia, much in the way that Hurry describes. Insomnia creates insomnia, but sound sleep can create a change in the mental pattern or habit of insomnia. Yet, despite their alleged efficacy, such drugs are not without extreme risk. Sawyer attributes the loss of “many human lives” to overdose because of self-administration, and cautions against allowing patients to “swallow chloral or any other of the dangerous but valuable hypnotics whenever he feels so disposed” (1628), which is, of course, what Scrope begins to do.

Dale leaves Scrope with a phial of his concoction, instructing Scrope to “Take it only . . . when you feel you must” but promising that “When you want more I will make you more” (77). Clearly, he ignores the caution Sawyer advises, through allowing his patient to self-administer the drug he has provided. Indeed, Scrope does begin to use the drug somewhat dangerously, and it has significant effects on his psyche. His first usage of the drug results in not only his change in position on the endlessness of World War I, but leads him to the sense that “something snapped—like the snapping of a lute string—in his brain” (82). Wells continues, “With a sigh
of deep relief the bishop realized that this world had vanished” (82). Whereas his insomnia forces him to acknowledge the changing state of the world, taking Dale’s drug removes him from the world altogether, and it is a feeling he quite enjoys. The hallucinogenic effects of this drug become more prominent as time progresses; he removes his Episcopal livery and converses directly with God:

“Oh God!” he cried, “God my Captain! Wait for me! Be patient with me!”

And as he did so God turned back and reached out his hand. It was indeed as if he stood and smiled. He stood and smiled as a kind man might do; he dazzled and blinded his worshipper, and yet it was manifest that he had a hand a man might clasp.

Unspeakable love and joy irradiated the whole being of the bishop as he seized God’s hand and clasped it desperately with both of his own. It was as if his nerves and arteries and all his substance were inundated with golden light. . . .

It was as if he merged with God and became God. . . . (88-89)

The bishop’s vision of God, made possible through his insomnia and pursuit of its treatment, reinforces his view of God and desire to follow God, but culminates in his rejection of the Church:

It may seem strange to the reader that this bishop who had been doubting and criticizing the church and his system of beliefs for four long years had never before faced the possibility of a severance from his ecclesiastical dignity. But he had grown up in the church, his life had been so entirely clerical and Anglican, that the widest separation he had hitherto been able to imagine from this past had left him still a bishop, heretical perhaps, innovating in the broadening of beliefs and the liberalizing of practice . . . but still with the palace and his dignities, differing in opinion rather than in any tangible reality from his previous self. (90)

Rankin comments that insomnia makes “Moral responsibilities multiply, and a progressive perception of the greater verities of existence creates new concepts of duty, which add to the burden of each day’s endeavour” (“Broken Sleep” 77). Scrope’s insomnia certainly follows this pattern. Hence, we can view the bishop’s
insomnia teleologically. His discontentment with various positions he is expected to adopt within the Church, in combination with his initial resistance to social change generate his insomnia, which in turn results in his renouncement of his position and break with the Church. Consequently, his break with the Church leads to his pursuit of his own independent religious doctrine, which is in the spirit of the revelations he has while under treatment for his insomnia. His insomnia creates the threshold over which all of the other changes in his faith and life take place.

Whereas for Miriam, insomnia becomes a welcomed signifier of her growing independence specifically because it allows her access to spheres from which her access had previously been limited because of her gender, the bishop’s insomnia is unwelcomed because it prohibits him from fulfilling his role as provider for his family assigned because of his gender. His role as provider for his family and as leader in the Church is complicated in multiple ways by his insomnia. The physical symptoms of his insomnia and its subsequent exhaustion make his job quite difficult to perform, as he struggles to prepare and present his sermons. His moral and spiritual crisis, both cause and symptom of his insomnia, culminates in an address in which he both renounces the Church and criticizes its role in the world, all quite publically. During a confirmation ceremony, intended to welcome the young to full participation in the Church, he shocks the crowd as he proclaims:

All ceremonies . . . grow old. All ceremonies are tainted even from the first by things less worthy than their first intention, and you, my dear sons and daughters, who have gathered to-day in this worn and ancient building, beneath these monuments to ancient vanities and these symbols of forgotten or abandoned theories about the mystery of God, will do well to distinguish in your minds between what is essential and what is superfluous and confusing in this dedication you make of yourselves to God our Master and King. For that is the real thing you
seek to do today, to give yourselves to God. This is your spiritual coming of age, in which you set aside your childish dependence upon teachers and upon taught phrases, upon rote and direction, and stand up to look your Master in the face. You profess a great brotherhood when you do that, a brotherhood that goes round that earth, that numbers men of every race and nation and country, that aims to bring God into all the affairs of the world and make him not only the king . . . of an united mankind. (141-42)

The opening part of his sermon renounces the role of the Church, positing it as an obstacle to God, and creates a sense of the falsity of distinction among religions. In a confirmation ceremony predicated upon the learning of Church doctrines and fostering participation in a specific ideology, Scrope denounces religion, with its ceremonies and doctrines, as the proper means of worshipping God. The next part of his sermon does little to appease the shocked group of parishioners:

It is your privilege, it is your grave and terrible position that you have been born at the very end and collapse of a negligent age, of an age of sham kingship, sham freedom, relaxation, evasion, greed, waste, falsehood, and sinister preparation. Your lives open out in the midst of the breakdown for which that age prepared . . . Our country is at war and half mankind is at war, death and destruction trample through the world; men rot and die by the million, food diminishes and fails, there is a wasting away of all the hoarded resources, of all the accumulated well-being of mankind; and there is no clear prospect of any end to this enormous and frightful conflict. Why did it ever arise? What made it possible? It arose because men had forgotten God. It was possible because they worshipped simulacra, were loyal to phantoms of race and empire, permitted themselves to be ruled by idiot and usurper kings. (145-46)

In this second part of his address, not only does Scrope criticize the Church for its reliance on ceremony and artifice, but he also blames it, at least in part, for the Great War. Because of the Church (and others like it), people developed both a sense of complacency and misplaced attachments, leading to division, devastation, and death. They worshipped not God, but symbols. False division of mankind, argues Scrope,
cultivated by religious practice and distinctions, made the war possible, and the generation of those about to be confirmed is reaping the outcome.

**Insomnia and Gender Roles**

After Scrope’s sermon, which he describes as a trance of sorts, Canon Bliss attempts to explain away his ideas through allegations of “illness”: “you had a kind of lapse—an aphasia. You mutilated the interrogation and you did not pronounce the benediction properly. You changed words and you put in words” (148). Scrope, on the other hand, asserts both his sanity and desire to leave the pulpit. Shortly thereafter, his wife, Lady Ella, sends for a doctor. Later that night, Scrope “had a temperature of a hundred and a half” and is advised by his doctor to stop thinking of “these things” (149). But, Scrope realizes that he cannot stop his thoughts continues on his course of changed belief.

The one obstacle he has preventing a complete break with the Church is his role within his family. During a bout of insomnia prior to the incident of the sermon, Scrope ponders the impact a full declaration of his feelings would have on his wife: “His wife became as it were the representative of all that held him helpless. . . . It was clear to him that any movement towards the disavowal of doctrinal Christianity and the renunciation of his see must first be discussed with her. . . . And he could not imagine telling her except as an incredibly shattering act” (108). Consequently, he “left things from day to day, and went about his episcopal routines” (108). Eventually, he tells her his feelings (before the sermon), to which she responds, “I know you have been sleepless, but I have been so ready to help you. . . . My life is all but to be of use to you” (138). To this point, she saw only the symptoms, but had no
understanding of the root of Scrope’s troubles. Much like Cannon Bliss, her advice is that he seek a doctor, rather than break with the Church. Yet, after his unexpected sermon, he can no longer hide his feelings from other members of the Church, and he understands that he has jeopardized their family’s security.

When he does quit the Church, the ultimate effect is one of unsettling and uprooting his family. Wells writes, “Never was the whole world of a woman so swiftly and comprehensively smashed. All the previous troubles of her life seemed infinitesimal in comparison with any single item in this dismaying debacle. She tried to consolidate it in the idea that he was ill, ‘disordered’” (170). Naturally, she blames his insomnia: “In the past he had always been a very kind and friendly mate to her, but sometimes he had been irritable about small things, especially during his seasons of insomnia; now he came back changed, a much graver man, rather older in his manner . . . but rigidly set upon his purpose of leaving the church” (171). His decision to leave the Church threatens not only his source of income, but also his family’s home, provided by the Church, as well. His family is forced to move into a much smaller abode and subsist on a much smaller income. To mitigate the crisis for his family, he attempts to work under the patronage of Lady Sunderbund, a wealthy American heiress with whom his new doctrines resonate, yet he rejects her patronage when he realizes she does not want to renounce the Church at all, but merely create one in a new form. Ultimately, his family is reduced to poverty, but his wife, given her sense of duty, chooses to follow him regardless of their circumstances, though she never fully understands his motives. In a final bout of wakefulness at two in the morning, the bishop realizes the conclusion of his spiritual quest, accepts that he will
have no ministry of his own, and realizes that he is ultimately alone in his manner of understanding God (at least within his family of women).

Richardson criticized Wells for his portrayal of female characters:

So far he has not achieved the portrayal of a woman, with the one exception of Leadford’s mother. His women are all one specimen, carried away from some biological museum of his student days, dressed up in varying trappings, with different shades of hair and proportions of freckles, with neatly tabulated instincts and one vague smile between them all. (“Crank” 400)

Lady Ella’s blind following of her husband regardless of her disagreement with him, her reduction of her husband’s spiritual crisis to the effects of a disordered mind perpetuated by insomnia, as well as her inability to understand the faith to which her husband ascribes, reinforce Richardson’s accusation, made more than a decade before *The Soul of a Bishop* was published. Perhaps this is why, in her portrayal of Hypo Wilson, Wilson is only able to view Miriam as a biological entity; he can never fully understand Miriam’s motives, and sees her insomnia as not part of her maturation, but rather an obstacle to it. Lady Ella is a “biological” character, and Hypo can only view women “biologically.”

Francie’s insomnia in *The Last September* is illustrated in similarly biological terms by the males in her life, her husband, Hugo, especially. Francie suffers from chronic ill health, which her husband simultaneously cultivates and denies, claiming that she is “fit for anything nowadays” (18) despite her fears to the contrary. Bowen describes the ways in which he dictates her sleeping behaviors, telling her that she should “lie down for a bit” because it will “freshen you up though you don’t need it” (19). She does, in fact, desire the rest as she “was so very tired from motoring. . . . Her thoughts ached” (18), and she acquiesces to Hugo’s ministrations. More
significantly, Hugo dictates her physical positioning as she rests, according to his own beliefs: “He made a valley for her head between the two pillows—he did not believe it rested anybody to lie with their head high—and she lay down on the bed with her head in the valley” (19). Francie understands that Hugo plays the dominant role in their relationship, though she realizes it appears to be quite opposite to outsiders:

They might well say she had taken the brilliant young man he’d once been and taught him to watch her, to nurse her and shake out her dresses. And she knew she could, now, never explain to Myra what she had failed to explain twelve years ago—when there had been so much less to justify—how Hugo was too much for her altogether. (20)

While it might appear that Francie is using her power to require someone else to care for her, quite the opposite is true. Hugo uses his care of Francie as a mechanism of control, simultaneously asserting her strength, but reifying her infirmity. But the true extent of his ability to control her behaviors, especially those related to sleep, is apparent when others in the household act as enforcers of Hugo’s regime. For instance, Lady Naylor says to Francie, in a manner very similar to Hugo’s, “You must go and lie down—you’re looking as fresh as a rose but I know how Hugo insists upon it” (82). Both Hugo and Lady Naylor send contradictory messages to Francie; she does not appear to be tired, but needs to rest nonetheless. Towards the end of the text, Lois comments about the sleep of a child: “Livvie kicked all night, she will be a horrible wife” (236). Through this comment and those made regarding the control of Francie’s sleep, Bowen illustrates the idea of feminine docility within a marriage through the manipulation sleep behaviors. Women who sleep rigidly so as not to disturb their husbands, like Francie, are also controlled by their husbands. Women
who sleep fitfully, like Laura (who abandons her husband and family) or Livvie, are much more difficult as wives and less likely to be controlled.

These three texts indicate a fascinating relationship between sleep and gender. Throughout the texts, we see men’s attempts to control either their own sleep, as with Scrope, or the sleep of the women around them, as is the case with Hypo Wilson or Hugo. Consequently, the women either succumb to their control (or at least the appearance of it), as does Francie, or resist it, like Miriam. Sleep becomes another means of domination over the female body, but female bodies react very differently to such domination. According to Alan Derickson, the relationship between sleep and women had a great deal to do with their eligibility for marriage:

As early as 1906, physician Emma Walker, writing in *Ladies’ Home Journal*, deployed the term “beauty sleep” in discouraging young women from late-night activities: “As a rule, girls do not realize what a very important element of beauty is the early bed-hour. It is not until they begin to see the lines coming and dark circles appearing that they wonder if late hours have anything to do with these fingermarks of time.” Women’s magazines continued to play on fears that excessive wakefulness would undermine good looks. (18)

Further, governmental regulations on sleep, particularly in the United States, “targeted those whose sleeplessness posed a threat to general welfare. From that perspective, in the earliest part of the twentieth century the most important safeguards were extended to wage-earning women whose reproductive capabilities served societal interests and supposedly depended on adequate rest” (Derickson 27). Bassuk argues that:

The belief in primacy of the reproductive organs in women was used to support the notion that a woman’s major responsibility was to propagate the race. Because doctors assumed that each organism possessed a finite amount of vital energy and was a closed system,
anything that diverted women’s energy from the reproductive function . . . must be avoided. (251)

Thus, the motivations to control female sleep represent an attempt at limiting the roles of women to those of showpiece (good marital prospect) and mother. Sleep becomes necessary for women for the purposes of preserving their looks and protecting their fertility, or, in other words, ensuring that they will reproduce successfully. However, as Miriam argues “If you define life for women, as husbands and children, it means that you have no consciousness at all where women are concerned” (3: 222).

Prior to World War I, “idle middle-class women” were perceived as “the chief clientele for nervous disorders” (Showalter, Female 195). Many doctors, such as Mitchell, “believed that women were fundamentally inferior to men and that their nervous systems were more irritable” (Bassuk 251). Thus, there appears to be more danger associated with females with insomnia, especially those like Miriam who choose insomniac behavior through the pursuit of interests other than marriage and child-rearing. However, these texts indicate that this notion is overly simplistic. For example, both Miriam and Scrope need their insomnia to reveal their sources of underlying conflict. Miriam’s insomnia reveals her conflict with gender norms and Scrope’s reveals his conflict with the relationship between the Church and modern society. Insomnia offers a solution for both characters; for Miriam, it enables her to incur on spheres beyond the domestic, and for Scrope, it forces him to confront, rather than attempt to ignore, his conflicts in pursuit of what he sees as a more honest spiritual path. The insomnia of both Scrope and Miriam lead to their supposed mental breakdowns, which ultimately afford them a “rest” from their duties that they find repugnant. Miriam, who should be “weaker,” handles her insomnia much more
successfully than Scrope does (though, given her mother’s suicide she sometimes
doubts this ability). Where Scrope tries numerous methods, including powerful and
dangerous drugs, to rid himself of insomnia so that he can return to his initial role
within the Church and his family, Miriam cultivates her insomnia as a source of
power and independence. Even when she seeks the help of doctors like Densley, she
does so with no intention of ridding herself of insomnia, but rather of ridding herself
of the conditions she finds untenable. She never attempts to “cure” herself of it, but
rather resists cures and exposes them as attempts to corral her individuality and force
her into the role of mother and caretaker. Other female characters, including Mrs.
Richardson, Sasha Jensen, and Francie, ones who see themselves as “relative beings”
do not handle their insomnia well and see it as a form of punishment for their
inadequacy in fulfilling their wife-mother roles. They do not handle their insomnia
well because they are judging themselves against external, rather than internal
expectations, and insomnia perpetuates their sense of judgment. As Miriam explains,
“Women were there, cleverly devised by nature to ensnare man for a moment and
produce more men to bring scientific order out of primeval chaos” (2: 122).

Subjectivity

Insomnia is a necessary component of each character’s subjectivity and does a
great deal in shaping their perceptions of the world. For example, when Scrope first
begins to experience insomnia, Wells writes, “It was as if he discovered himself
flimsy and transparent in a world of minatory solidity and opacity. It was as if he
found himself made not of flesh and blood but tissue paper” (34-35). The bishop’s
insomnia parallels his growing sense of the destabilization of his place within the
world. He can no longer see himself as fixed in the role that he has played for decades, but begins to see this role as incredibly fragile and malleable. As his insomnia continues, his sense of detachment from the world increases: “Again in a slight detail he marked his strange and novel detachment from the world of his upbringing. His hallucination of disillusionment had spread from himself and his church and his faith to the whole animate creation” (38). Once he loses his sense of place in his world, as the stability of his subjectivity is undermined through his insomnia and the perceptual changes it engenders, he finds himself as “other” to the world with which he is familiar. But because he must, at least for a while, function within the bounds of his old world, he sees himself as a person divided: “During his spells of insomnia he led a curiously double existence” (43). Eventually he comes to a realization that makes him quite uncomfortable, at first, thinking that “he was the most unreal thing in the universe. He was a base insect giving himself airs. What advantage has a bishop over the Praying Mantis, that cricket which apes that attitude of piety? Does he matter more—to God?” (118). In this passage, we see the bishop’s new view of spirituality emerging, a spirituality in which customs and doctrines are subsumed to an overall sense of unity under God. However, he is not yet comfortable with his new stance: “He was afraid of greatness. He was afraid of the great imperatives that would take hold of his life. He wanted to muddle on for just a little longer. He wanted to stay just where he was, in his familiar prison-house, with the key of escape in his hand” (119), the “key” being Dale’s hallucinogenic drug. The bishop’s desire to “muddle on” within his “prison-house” indicates his resistance to his re-imagined role in the world, but it is this same resistance that perpetuates his
insomnia. In this passage, he is conflicted over the use of Dale’s drug, which would alleviate his insomnia, but also open him to the visions that make his participation in the Anglican Church untenable. Throughout the text, Scrope’s insomnia and subjectivity are interrelated; because of his insomnia, his role shifts from that of servant of his Church and King to servant of God alone. Consequently, he must also sacrifice his role as provider for his family, another change in subjectivity altered through his insomnia.

Much as Scrope’s insomnia shapes his perception of his relationship to the world, Miriam’s does the same. By simple virtue of being a woman, she is ensnared in the role of caretaker to a neighbor, the perpetually ill and dependent Miss Dear. Because of her desire to maintain independence, she refuses to define herself in this way and rejects this role forcefully. To Miss Dear’s finance, Mr. Taunton, she says:

You are very much mistaken in calling on me for help . . . ‘domestic work and the care of the aged and the sick’—very convenient—all the stuffy nerve-racking never-ending things to be dumped on women—who are to be openly praised and secretly despised for their unselfishness—I’ve got twice the brain-power you have. You are something of a scholar; but there is a way in which my time is more valuable than yours. There is a way in which it is more right for you to be tied to this woman than for me. Your reading is a habit, like most men’s reading, not a quest. You don’t want it disturbed. (2: 279)

In this passage, Miriam declares her own subjectivity, as a woman and intellectual, but not as a caretaker. She allows herself to place her intellect above that of Taunton. Much of her ability to make this assertion comes through her insomnia, as it relates to her reading at night. That insomniac-time enables her to put her intellectual self first, over her role as caregiver to her pupils, and enables her to view this part of her time as equally, if not more, valuable than Taunton’s time. From Miriam’s comments, it
seems as though he feels it is quite natural for his reading time to be undisturbed, but for hers to be sacrificed to fulfill her more “natural” role as a woman, yet she, rather than feeling ashamed of spending her nights awake as she first does, realizes that her insomniac, intellectual and exploratory self is the exact self she wants to prioritize, even at the expense of a man’s time. She refuses to subsume her own interests to that of Taunton’s and in doing so, situates herself not as relative to him, but relative only to herself and her own priorities.

Bowen’s text is a bit different than *Pilgrimage* and *The Soul of a Bishop* in that the characters generally remain stable despite the instability around them. The exception is Lois, who, in the course of the novel, falls in love with a man named Gerald and loses him to fighting with the Irish rebels. Initially, Lois equates insomnia with being happy, either through an apolitical society as discussed earlier or happy in marriage: “One of the things Lois chiefly wanted to know about marriage was—how long it took one, sleeping with the same person every night, to outlive the temptation to talk well into the morning? There would be nothing illicit about nocturnal talking. . . . Would conversation, in the absence of these prohibitions, cease to interest?” (10). Insomnia, rather than being rebellious, becomes an expression of love. Yet, as the text progresses, she comes to see sleep as the sign of happiness, as when she thinks of Gerald: “she glimpsed a quiet beyond experience, as though for many nights he had been sleeping beside her” (128). When Lois witnesses Hugo’s affections for Marda (instead of his wife Francie), she is unable to sleep (168), again relating insomnia to dissatisfaction in marriage. Later, when her relationship with Gerald becomes unstable, this instability is expressed through insomnia. Bowen writes, “Still no
answer, as though he were asleep. And indeed he felt, as at the approach of sleep, an immense indifference. She, tortured by the loneliness of insomnia, had to cry out: ‘Won’t you even just try—won’t you just kiss me?’” (282). Lois, who resists, then accepts the idea of being a wife (which is ultimately denied to her in the way she imagines when Gerald dies), her views of insomnia change accordingly.

Emil Cioran asks of his readers:

Have you have had the brutal and amazing satisfaction of looking at yourself in the mirror after countless sleepless nights? Have you suffered the torment of insomnia, when you count the minutes for nights on end, when you feel alone in this world, when your drama seems to be the most important in history and history ceases to have meaning, ceases to exist? When the most terrifying flames grow in you and your existence appears unique and isolated in a world made only for the consummation of your agony? (18)

Though masked as questions, Cioran’s interrogation draws some conclusions: insomnia is a disorder of radical individualization, forcing the sufferer to valorize his or her own suffering and view the self as “unique and isolated” within the world. Further, it removes the insomniac from generalized historical significance and places his or her own history above general history. As a form of subjectivity on its own, insomnia has the function of removing the individual from historical subjectivity, though not subjectivity altogether. For this reason, insomnia allows people to expose and escape other forms of categorization, specifically those of gender. However, the sleeping world—those not experiencing insomnia, still strive to relocate the insomniac within history, but the insomniac’s perspective of himself or herself is forever altered. Insomnia changes both Miriam and Scrope. Their insomnia allows them to redefine themselves outside of the boundaries of their historical categorizations. Bowen, however, presents insomnia in a different light. Her
characters do not change because of insomnia, but rather as they change, so do their views of insomnia. This difference speaks to the disparate goals of the texts. All three texts depict individuals acclimating to a new society with various levels of resistance or compliance. However, Miriam and Scrope (eventually) come to welcome and require change; Bowen’s characters, on the other hand, seek stability. Regardless of the different approaches these texts take to the relationship between insomnia and subjectivity, they assert the importance of this relationship in shaping and reflecting one’s ever-fluctuating identity within the world, presenting insomnia as a form of transcendence into previously inaccessible categories of subjectivity and escape from categories, which for many reasons, have become unsustainable for the individual.
CHAPTER 5

I CAN SLEEP WHEN I’M DEAD: RESTLESSNESS AND STATUS

In the essay “Sleeping and Waking,” F. Scott Fitzgerald writes, “It appears that every man’s insomnia is as different from his neighbor’s as are their daytime hopes and aspirations” (63). His observation not only echoes the idea of insomnia as a highly individualized disorder, but also links insomnia to social role and what a “man” aspires to become. Fitzgerald’s idea of “hopes and aspirations” is perhaps related to Max Weber’s description of “labour as a calling” (121), a calling that had spiritual, as well as practical implications, which Weber discusses in his famous work *The Protestant Ethic and the Spirit of Capitalism* (1930). To an extent, insomnia takes on a socio-economic component inasmuch as it is linked to a person’s daytime drives and ability to meet vocational demands. Further linking his insomnia to vocation through his repetition of the word “work,” Fitzgerald writes, “My own experience with night pests was at a time of utter exhaustion—too much work undertaken, interlocking circumstances that made the work twice as arduous” (“Sleeping” 64). Overwork, which I have discussed in previous chapters as a cause of insomnia, especially when that work is mental, clearly plays a role in Fitzgerald’s insomnia. More importantly, his drive towards overwork, and its resultant restlessness, does too. This drive, the sense that one should keep busy and undertake “too much work,” has deep roots in capitalist mentality.
Fitzgerald’s linkage among the drive towards self-improvement, the role of work in reaching aspirations, and the association of work with restlessness and insomnia reflects a Western capitalist mentality with Protestant origins. The drive to produce and the restlessness associated with this drive are explained by Weber:

The religious valuation of restless, continuous systematic work in a worldly calling, as the highest means to asceticism, and at the same time the surest and most evident proof of rebirth and genuine faith, must have been the most powerful conceivable lever for the expansion and attitude toward life which we have here called the spirit of capitalism. (116)

In addition to illustrating a relationship between restlessness and faith, Weber’s argument extends to the idea that to not be working is sinful, immoral behavior, further explaining this compulsion towards work Fitzgerald displays. According to Weber, “Waste of time is thus the first and in principle deadliest of sins. . . . Loss of time through sociability, idle, talk, luxury, even more sleep than necessary for health, six to at most eight hours, is worthy of absolute moral condemnation” (104). Waste, the worst form of sin as Weber asserts, can take the form of too much sleep, but insomnia itself, if not spent productively, can also be construed, according to the dictum above, as waste because it is not time in labor or recuperating from labor, but rather “idle” time. Fitzgerald’s association between aspiration and restlessness may not necessarily be religious, but is certainly ethical. For Fitzgerald, this “restlessness” manifests as insomnia, which is the time of confrontation between what a “man” is and what he hopes to be. He struggles with this insomnia because it is time that he is not tackling the overwhelming amounts of work he has taken on; similarly, as we can see with Fitzgerald’s numerous depictions of the dissolute and immoral lives of the idle wealthy, wasting time when one could or should be working creates a sense of
restlessness and dissatisfaction. For Weber, restlessness takes on a dual meaning, in part as a bridge or path to fulfilling both economic and spiritual goals, but if not spent productively as with insomnia, as a form of sinful indulgence.

Paul Lafargue, a Marxist social critic, presents an altogether different view of the function of rest and restlessness in reaching one’s potential, and he views work (or lack of rest) as “the cause of all intellectual degeneracy, of all organic deformity” (23). Where Weber sees degeneracy (at least from an analytical, if not personal, perspective) in laziness, Lafargue points to an “intellectual,” rather than moral degeneracy that comes when one cannot be idle at all. His main purpose in his essay “The Right to Be Lazy” is to attack the ideology later explored by Weber, which exalts what Lafargue refers to as “the religion of work” (28). Lafargue, contrary to Weber, argues that persistent restlessness and need for work are ultimately destructive to one’s aspirations and self-fulfillment. The hope of finding meaning through labor alone is impossible:

This delusion is the love of work, the furious passion for work, pushed even to the exhaustion of the vital force of the individual and his progeny. I, who do not profess to be a Christian, an economist or a moralist, I appeal from their judgment to that of their God; from the preachings of their religious, economics, or free thought of ethics, to the frightful consequences of work in a capitalist society. (23)

He disavows religion referring to “their God”, but not his own, and part of his problem with religion is its correlation between work and holiness or purported goodness. The consistent drive to work, Lafargue argues, ruins the laborer, as well as his family (28), so certainly has moral consequences, if not spiritual ones. Rather than allowing the laborer to reach moral or economic aspirations, work increases “individual poverty” and assures “that becoming poorer, you may have more reason
to work and become miserable” (32). Similarly, Fitzgerald argues that his overwork and subsequent insomnia led him to “hating the day because it went towards night” (“Crack-Up” 72), thus fostering misery. Fitzgerald continues, noting the destructive character of his insomnia with relation to his work ethic:

In this silence there was a vast irresponsibility toward every obligation, a deflation of all my values. A passionate belief in order, a disregard of motives or consequences in favor of guess work and prophecy, a feeling that craft and industry would have a place in any world—one by one, these and other convictions were swept away” (“Crack-Up” 78).

Fitzgerald, of course, is not a laborer of the type Lafargue addresses; however, Fitzgerald’s exhaustion, a product of his own form of labor, does evoke the consequences of which Lafargue warns. Fitzgerald simultaneously points to the need for restlessness in exposing aspirations, but the danger of restlessness in becoming an obstacle to those same aspirations.

Despite their opposing views on the value of work for self or spiritual fulfillment, Weber and Lafargue do agree on the danger of doing no work at all. Weber, for instance, states, “Sloth and idleness are such deadly sins because they have a cumulative character. . . . They are the antithesis of a methodical life” (236). Lafargue, who encourages some laziness, which he refers to as the “mother of arts and noble virtues” (51) seeks a balance between complete sloth and overwork, suggesting that all work equally, for three hours a day (34). In agreement with Weber, Lafargue argues that the overwork of the laboring class and subsequent sloth of the rich harms not only the laborers, but also the upper classes. Men who live off of the work of others are “condemned to laziness and forced enjoyment, to unproductiveness and over consumption. But if the over-work of the laborer bruises
his folk and tortures his nerves, it is also fertile in griefs for the capitalist” (38). In Lafargue’s opinion, no good comes from perpetual restlessness in either the drive to work or to stand idle and bored while others work. The work of many creates indolence in a few, and neither condition is ideal. For Weber, good can certainly come from the drive to work hard, but sloth breeds hedonism and immorality. Fitzgerald’s novel The Beautiful and Damned clearly indicates his agreement with this point made by both Weber and Lafargue, by illustrating the disastrous consequences of indolence, dissolution, and hedonism due to the failure of the individual to engage in productive work. Fitzgerald’s own comments point to the need for balance as well, asserting the harm in too much work, but acknowledging the compulsion to do so and its resultant sense of restlessness.

Fitzgerald is not alone in his depiction of unfulfilled social or economic aspirations as productive of individual strife. Much of what Fitzgerald describes in The Beautiful and Damned as a conflict between desire and capability corresponds with what sociologist Émile Durkheim refers to as anomie. According to Durkheim:

No living being can be happy or even exist unless his needs are sufficiently portioned to his means. In other words, if his needs require more than can be granted, or even merely something of a different sort, they will be under continual friction and can only function painfully. Movements incapable of production without pain tend not to be reproduced. Unsatisfied tendencies atrophy, and as the impulse to live is merely the result of all the rest, it is bound to weaken as the others relax. (82)

For Durkheim, no one can be content if they want more than they can reasonably afford or attain. Fitzgerald’s protagonist, Anthony Patch, raised in wealth, but lacking his own means of subsistence supports Durkheim’s claim, as we watch him struggle to maintain a lavish lifestyle despite his inability to do so. Similarly, as he
becomes enslaved by his own indulgences in alcohol, women, and parties, his intellectual pursuits, for example, his desire to write (in a year abroad after college he writes “some ghastly Italian sonnets” (8), for example), do, indeed, atrophy, as does his desire even to remain alive. As he exclaims to his future wife, Gloria, “I do nothing, for there’s nothing I can do that’s worth doing” (65). He continues in an attempt to rationalize his sloth, “But I want to know just why it’s impossible for an American to be gracefully idle. . . . I don’t understand why people think that every young man ought to go down-town and work ten hours a day for the best twenty years of his life at dull, unimaginative work” (65). Even so, without work, he does not find himself any happier than he would have been at a job. His laziness leads to self-indulgence, leading to more laziness, and so forth. To a great extent, Fitzgerald expresses Anthony’s struggle with his chosen idleness and its consequences through his insomnia, as this chapter will argue.

Likewise, other modernist authors, such as Waldo David Frank, in the novel *Holiday* and E. M. Forster, in *A Passage to India* make a similar connection between anomie and insomnia. For both Frank and Forster, anomic conditions are created not as much by class distinctions as they are racial and colonial interactions and hegemonies. Anomie occurs when characters are exposed to a mode of living, whether economic or based in freedoms of behavior and access, that they, themselves, are unable to attain. Victoria Hade, for instance, sees a mode of living in the black laborer John Cloud that she will never, as a white woman, be able to achieve. And, in Forster’s novel, Dr. Aziz’s freedoms are limited because he is colonial subject, yet one who constantly interacts with the British rulers who have a greater freedom of
movement and behavior. These texts all contain characters whose insomnia reflects a conflict among their social aspirations, the work that they do or do not do, and their class status (as reflected by wealth, ethnicity, and status within a colonial society). Further, these texts indicate a discrepancy between the pure drive to work and the ability to attain privileged status through work alone. In all three texts, insomnia becomes a device through which the characters’ anomie is realized and explored.

**Insomnia and History**

Because I am looking at insomnia as it is related to economic and social status, some background information on the relationship among sleep, class, and the necessity of work is useful. One major distinction between pre-modern times and modern times in Western society comes with this relationship. The way in which this relationship has changed is especially informative when relating insomnia to capitalist systems of production. While many academics argue that insomnia is a condition of modern life, A. Roger Ekirch suggests that modern academics falsely idealize the sleep of pre-industrial peoples: “Implicit in modern conceptions of sleep before the Industrial Revolution remains the wistful belief that our forebears enjoyed tranquil slumber, if often little else, in their meager lives” (285). On the contrary, “early modern slumber was highly vulnerable to intermitted disruption, much more so, in all likelihood, than is sleep today” (Ekirch 288). Ekirch notes that a seventeenth century healer reported that over twenty percent of his two thousand patients complained of insomnia (290). Granted, this evidence is not a “scientific” study of insomnia, rather it is anecdotal, but still indicates that a significant portion of the population, particularly the under-classes, had trouble sleeping.
The primary difference between insomnia in pre-modern eras and insomnia of the Modernist period is the direct correlation in pre-modern times between the likelihood of insomnia and being of the lower social classes specifically because of lower class living environments. As Ekirch argues, while the wealthy undoubtedly suffered insomnia at times due to stress, “those with the fewest resources to cope with life’s problems remained the most ‘wakensome,’ or vulnerable to insomnia” (290). This correlation existed primarily because the lower classes had less access to comfortable sleep for a number of reasons. One major reason the lower classes often had trouble sleeping was fear; “Of all mortal emotions, fear most often broke sleep,” claims Ekirch (290). Fears could be related to subsistence, but also to physical danger such as that presented by robbers and other criminals (291). In addition, where the rich could afford comfortable beds, the poor were often more likely to endure sleep spaces that “were ill suited to peaceful repose” for reasons including noise either from urban traffic in the city or animals in the country (292), as well as poorly insulated and poorly ventilated homes that made sleep uncomfortable (293). Other interferences with the sleep of the lower classes included the necessity of night-work (in addition to, rather than as a replacement for daytime labor) (Ekirch 161). I find this information about insomnia in pre-modern societies informative because it throws into such sharp contrast the insomnia of modern times. Insomnia in pre-modern times was often what I will refer to as “environmental” insomnia—it has a direct correlation with environmental circumstances: lack of comfort, safety, food or time to sleep. This type of insomnia had not been eradicated by the Modernist period or even today, and it remains an issue of the under-classes.
In modern times, we see an increased level of the visibility of insomnia. As Ekirch argues, one of the consequences of industrialization was a “pushing back of the darkness” (333) inherent in more abundant nighttime lighting, as well as more regulated (rather than idiosyncratic and personalized) night work. With this reduction of darkness came surveillance: “Critics complained that the light was too harsh. If night became more accessible, it also became less private, on the job and off. Not only could the human eye now see a farther distance, but there were infinitely more eyes in public by which to be observed. . . . All persons faced greater scrutiny at night” (Ekirch 333). With greater visibility comes a great awareness of individual habits, exposing individuals whose habits do not conform to an increased likelihood of intervention. Thus, the nighttime habits of people became a matter of public concern and scrutiny rather than a private behavior unobserved by outsiders. As late nineteenth and early twentieth century studies into fatigue attest, poor sleep habits among the poor were a matter of concern only inasmuch as poor sleep affected productivity, even if concern over the poor sleep of the poor in and of itself was not generally an issue when it did not affect outsiders. In pre-industrial times, the poor man or woman’s lack of productivity due to exhaustion was mostly his or her own problem. However, in industrial times, insomnia had greater social implications beyond the individual’s experience, as it may harm a wider group of people beyond the individual worker and his or her family. For example, if a farm laborer gets into an accident on his farm because of exhaustion, he and his family may suffer. But, if a factory worker causes an industrial accident because of that same exhaustion, the stakes are much greater, for the other employees who may be injured, but more so for
the employer who loses labor time, laborers, and has to pay the cost of repairs. Insomnia is more of an issue because not only is it more visible, it creates a broader range of complications for a larger group of people.

The Modernist period, for reasons I have discussed in previous chapters, also gave rise to a whole new type of insomnia, unrelated to manual labor or environmental circumstance. Insomnia, as that suffered by characters like Fitzgerald’s Anthony and Frank’s Virginia, is not due to lack of comfortable sleeping spaces, fear of intruders, or outside disturbances, but is instead based in social anxiety. Because this new form of insomnia exists due to internal, rather than external circumstance, the insomnia of modern times takes on another discursive angle in terms of its perception as a disorder of the individual rather than the environment. As I discussed in the second chapter, fatigue was of great social concern during the Industrial era. However, the focus of the medical discipline was not generally on conditions of poverty creating disrupted sleep (though such conditions certainly existed), but rather aimed towards the middle and upper classes who could exert greater control over their sleeping environment and health-related routines such as proper diet and recreational exercise (which requires free time and energy). A wealthier person might seek treatment for sleeplessness, but a laborer’s sleeplessness would not be noticed until it became a problem for his or her bosses. Thus, to be diagnosed or treated for insomnia generally required access to doctors and psychologists, but also relied upon the assumption that one could control one’s sleeping environment. As such, during the modern age, insomnia is discursively understood as less connected to external environment and more to internal
environment, including one’s own mind and bodily conditions. In fact, physical labor, with its exhausting capabilities, was largely thought to prevent insomnia, and the less educated and prestigious were thought to be less prone to suffering from it because of the relative (alleged) inactivity of their minds; perpetual physical discomfort is no longer discursively significant to insomnia as a condition. Insomnia is no longer a condition of circumstance, but more so a condition of individuality, and also, more clandestinely, status. Though anyone may suffer from insomnia, treatments are aimed towards those who have the time for sleep and resources to cultivate a “proper” sleeping environment. Insomnia itself becomes anomic in the sense that a tension exists between having hopes of sound sleep and having the ability to sleep soundly. The poor, whose disruptive environments often precluded their hopes of sound sleep, did not assume sound sleep was even possible—exhaustion was an inevitable given. Yet, the wealthier, who could afford at least the environmental conditions allowing for good sleep, but could not attain it, experienced a tension between aspiration and attainability because of insomnia, making it, in this sense, a disorder of privilege.

**Insomnia of the Superfluous Man**

Fitzgerald’s character Anthony, in *The Beautiful and Damned*, is an excellent example of a character who suffers from insomnia related to social status and position. Anthony is in a unique position of social privilege within this text, as he is raised with all the trappings of luxury, has become used to those trappings, yet loses his financial support halfway through the text. Initially, Anthony’s insomnia is based in his anxieties caused by his privileged position and the pressures it entails, and later,
it is based in his anxieties about maintaining his position. He cannot use his privilege to eliminate his insomnia; in fact, his privilege (and attempts at maintaining it) exacerbates his condition. He “fits in” excellently with upper class society, but cannot adjust his lifestyle when his economic circumstances change fostering his sense of anomie, nor can he uses his class status to protect himself against unhappiness and anxiety. Fitzgerald replicates Anthony’s tenuous and anomic social position (trapped between desire for the luxury to which he has grown accustomed and his inability to sustain it) through his liminal depiction of Anthony’s character.

From the beginning of the text, Anthony is characterized liminally and nocturnally. As the story opens, we learn that Anthony “has as yet gone no further than the conscious stage” and he wonders if he is “a shameful and obscene thinness glistening on the surface of the world like oil on a clean pond” (3). These opening sentences suggest Anthony’s inability to access his own depths, with both the metaphor of remaining always in the “conscious stage” thus not reaching unconsciousness, and the image of his existence only on the surface of a (much deeper) pond. Anthony views himself in a dual light. In part, he believes that he is “exceptional,” “thoroughly sophisticated,” and “well adjusted to his environment,” but there is a conflict between his positive, socialized view of himself as a member of the elite and his awareness of his own superficiality since he has lived his life to this point with no real sense of earning his status or motivation to become self-reliant. Being born into wealth leaves Anthony trapped in a state of developmental delay, as he is given the resources and education with which to make his own way in the world, yet lacks the motivation to do so; he is liminally trapped between external wealth and
internal impoverishment. Fitzgerald characterizes him as “a man who was aware that there could be no honor and yet had honor, who knew the sophistry of courage and yet was brave” (3), indicating his fundamental internal contradiction, bordering on hypocrisy. Anthony’s ultimate, unattainable hope is to “accomplish some quiet subtle thing that the elect would deem worthy” so as to “join the dimmer stars in a nebulous, indeterminate heaven half-way between death and immortality” (3). Of course, what this “thing” may be, Anthony has yet to figure out, and he puts much more effort into avoiding this revelation than fostering it. All he is sure of is his desire for approval from “the elect” and nothing more. The language Fitzgerald uses in his initial descriptions of Anthony is the language of liminality, as he describes a character who both loathes and vaunts his superficiality, values appearance but is aware of its shallowness, and takes pride and comfort in, but also has contempt for, his upper class status because, through privileging him, it has ruined him as well. More significantly, however, Fitzgerald uses images of consciousness to illustrate Patch’s character. He is trapped in the “conscious stage,” so, despite hints at a deeper level of self-awareness of his unconscious self, he has yet to truly access this part of his being. His ultimate hope is essentially to attain a state of perpetual insomnia, neither fully present nor fully eradicated by death because he can enact no other alternatives, or at least thinks he cannot.

Anthony’s initial characterization as an ontological insomniac, trapped between the conscious world of artifice and appearance and the unconscious world in which he could possibly some day access his inner self and the way in which he truly hopes to give his life meaning, persists throughout the opening pages of the text. As
we learn, Anthony’s given name is Anthony Comstock Patch; however, “the Comstock dropped out of his name to a nether hell of oblivion” (5). Again, we get the sense of his complete identity lying below an inaccessible surface, with hints of its presence but access withheld. Not surprisingly, in addition to his insomniac soul, Anthony has also suffered from chronic insomnia, related to a fear of illness, since adolescence: “It was as a concession to his hypochondriacal imagination that he formed the habit of reading in bed—it soothed him. He read until he was tired and often fell asleep with the lights on” (7). While early in his life, his reading essentially allows him to indulge his fear of the dark (and death through assuaging his hypochondria), later in life, his “reading,” or, more accurately, book-purchasing, takes on a materialistic component: “He laid the foundations for a library by purchasing from a wandering bibliophile first editions of Swinburne, Meredith, and Hardy, and a yellowed illegible autograph letter of Keats’s, finding later that he had been amazingly overcharged” (8). Notably, Fitzgerald never references Anthony actually reading these texts, especially not the “illegible” letter of Keats, thus indicating that his love of books serves a purpose other than intellectual interest or pursuit. Initially, his reading is a distraction, preventing him from having to acknowledge his own thoughts and fears. Later, books become showpieces for his library, symbols of economic status, rather than subjects of intellectual interest. He buys books not to read them, but to own them.

Further relating insomnia to materialism, or, more specifically, the obfuscation of the internal through a focus on the external, Fitzgerald writes that as a child, “His stamps were his greatest happiness . . . he lay awake at night musing
untiringly on their variety and many-colored splendor” (7). Again, we see Anthony’s obsession with appearance, as he focuses on their colors and the breadth of his collection (as opposed to their individual artistry or the emotional or creative significance of the places they represent). He seems to always be fighting his insomnia, both as a boy and later in life with alcohol and women rather than objects. His insomnia comes to represent his awareness of the “vague melancholy that was to stay beside him through the rest of his life” (6), but also representative of his attempts to escape that melancholy through the accretion of material goods. For example, rather than muse on his unhappiness and fear at night to get to its source, the childhood version of Anthony occupies his mind with either reading or pondering his stamp collection—both distractions from thoughts about himself. As an adult, he has a similar experience of insomnia after a successful date with Gloria: “In bed that night with the lights out and the cool room swimming with moonlight, Anthony lay awake and played with every minute of the day like a child playing in turn with each one of a pile of long-wanted Christmas toys” (127). Again, his insomniac thoughts are described in material terms. Rather than stamps, in this case, he is treating the moments of his prior happy day, specifically the distraction from melancholy that Gloria initially provides, as material objects, to be “played with” for his amusement and distraction. His moments are things to him. But, of course, the excitement a child has over toys on Christmas is short-lived and somewhat superficial; the joy is only temporary and cannot be sustained over the course of a lifetime, only remembered. Anthony’s insomnia in these scenes is an insomnia of avoidance, rather than confrontation as it is with many other characters, but it is also an insomnia that
hints at a not readily (or willingly) accessible part of Anthony’s nature that loathes what he is and dreads what he is already becoming.

Another means Fitzgerald uses to characterize Anthony as an insomniac through allusions to spiritual ills is the repetitive symbolism of vampirism used to describe the various women with whom Anthony associates. He was born to an “anaemic lady” (5) immediately relating his character to blood disorder. In addition, his friend Muriel Kane had been “told constantly that she was a ‘vampire,’” (83). This association connects Anthony to a woman who subsists through draining the life of others. Most telling, however, is the “vampirism” of his wife, Gloria. Gloria, in recounting a friend’s description of herself claims, “[Mrs. Granby] thinks I may be a vampire” (186). She is indeed a vampire, in the economic sense that she survives through her dependence on others, but also because of her desire to make her life nocturnal. Gloria’s true goal in life is to rest. When Anthony asks her what she hopes for in life, she replies, “I want to sleep. . . . I want to just be lazy and I want some of the people around me to be doing things, because that makes me comfortable and safe” (66). She lives for the night, essentially, but more so the night in which she is completely vulnerable to and dependent upon the attentions and care of others. She never wants to act or work for herself, relishing her own languor. She does not want to be herself in mind, but only in body, an object cared for by those around her. Anthony continually finds himself surrounded by vampiric women, creating a further connection between himself as a central point amongst these women, and heavily associated with their nocturnality, dependence, and spiritual and physical anaemia.
The vampire not only has literary significance as a perpetual insomniac and liminally trapped soul, but medical and moral significance as a figure of extreme depletion for those around him or her. Silas Weir Mitchell, in *Fat and Blood*, refers to “an hysterical girl” as “a vampire who sucks the blood of the healthy people about her” (49). For Mitchell, healthy blood means a healthy life, and thus, the female “vampire” is literally draining the life and energy of those around her. While Gloria is not medically diagnosed as “hysterical,” her desire to live in complete dependence upon those around her in order for her to sleep comfortably reflects Mitchell’s position on the vampiric girl as a drain on her family. If sleep is a state of vulnerability and surrender of the self, then Gloria’s desire to “sleep” reflects this drive to subsist on the energies of those around her, which, as both Lafargue and Weber assert, leads to moral atrophy.

Not only does Anthony surround himself with vampiric women, his own lifestyle comes to mimic that of the vampire, living only by what he can take from others, and spending his days in bed while his evenings are active. He is a Dracula-like figure to those around him, both controlling and perpetuating their insomnia and soullessness through his own. Throughout the texts are allusions to Anthony’s dependence on his grandfather for subsistence, as well as his non-standard sleep habits. For example, he wanders New York at two in the morning (117), stays awake all night picturing his “ideal” future with Gloria after their misguided purchase of a house that they could not afford (178), stays awake brooding over the unhappiness of his marriage shortly thereafter (210), and lays in bed all day after abruptly quitting a much needed job he only held briefly (231). His life is full of nighttime activities,
most of which include drunken parties and all of which are drains on his finances. One of these nighttime parties culminates in a crisis, as his mortified grandfather disinherits Anthony after unexpectedly arriving at a drunken shindig (293). His grandfather’s arrival signifies the end of his practical ability to live vampirically, but like the vampire, he cannot be changed without ceasing to exist, and he refuses to change his lifestyle and habits accordingly.

Given its associations with vampirism and the liminal, “nebulous” state of Anthony’s soul, his insomnia is frequently tied in with his morality. Fitzgerald uses Anthony’s insomniac state as a heterotopic place from which Anthony can possibly redeem himself from his frivolous and empty life (yet fails to do so); thus Anthony’s morality and class status are inextricably linked. It is during certain periods of insomnia through which we see Anthony getting glimpses of the origins of his perpetual melancholy. For example, Fitzgerald describes Anthony sitting sleepless in his apartment after a night of drinking:

Back in his apartment, the grayness returned. His cocktails had died, making him sleepy, somewhat befogged and inclined to be surly. . . . Oh, he was a pretentious fool, making careers out of cocktails and meanwhile regretting, weakly and secretly, the collapse of an insufficient and wretched idealism. He had garnished in his soul the subtlest taste and now he longed for old rubbish. He was empty, it seemed, empty as an old bottle— (56)

In this liminal state between consciousness and unconsciousness Anthony briefly sees the “grayness” of his life; gray is a liminal color, neither black nor white. But, he also notes that even his regret is not strong enough to make him change, and he has lost any idealism, however “wretched” and “insignificant” it once was, and tied, through the image of the empty bottle to his vice. Further, he acknowledges his own
soullessness, in the sense that he has focused the energies of his soul on pursuit of his external display of “taste” rather than anything of internal value. This passage does not end with a full stop, but rather a dash, indicating that Anthony’s thoughts are not completed, but instead interrupted. Importantly, they are not interrupted by unconsciousness, which would allow him a release from his semi-conscious hell, but rather a reawakening, courtesy of Gloria at the door to his apartment. He remains, as Fitzgerald states earlier in the novel, as “going no further than the conscious stage” (3) in his thoughts. Gloria’s disruption of his thoughts returns him to the “dazzling” (57), yet distracting quality of his daily life. The insomnia that could have led Anthony to unconsciousness, but more importantly an awareness of his unconscious self, motivations, and the true nature of the problems that have been eating away at him, culminates in a return to the “dazzling” façade of his everyday being.

Anthony has a similar semi-revelatory moment just before the beginning of his doomed marriage to Gloria. On the eve of his wedding, he goes to bed excited for the “union of his soul with Gloria’s, whose radiant fire and freshness was the living material of which the dead beauty of books was made” (148). Again, he associates Gloria with living death, but in a way that Anthony thinks to be flattering at the time. He compares her to “the dead beauty of books” indicating that the purpose of a book, for him, is in its external beauty, rather than its ability to bring something alive within his mind or soul, as it, itself, is dead. And beauty, effeminized here, is also equated with both death and femininity. His attempt at sleep is disrupted by a screaming sound from outside, and again, his insomnia reveals the emptiness of his life:

Anthony stood by the window a moment longer before he returned to bed. He found himself upset and shaken. Try as he might to strangle
his reaction, some animal quality in that unrestrained laughter had grasped at his imagination, and for the first time in four months aroused his old aversion and horror toward all the business of life. The room had grown smothery. He wanted to be out in some cool and bitter breeze, back in the corners of his mind. Life was that sound out there, that ghastly reiterated female sound. . . . Burying his face in the pillows he tried in vain to concentrate upon the details of the next day. (150)

In this passage, as in the aforementioned one, there is the association of the feminine and death (the “ghastly” laughter), but also with femininity and animality. The woman he hears is somehow less than human simply because of her spontaneous moment of happiness (and even femininity itself). Perhaps because of this “animal” quality in her laugher, her display of her enjoyment of life, he equates this sound with life as much as death, but life itself for him is a sort of death. The idea of death in life is associated with the feminine here, which is especially telling as he is about to unite his life with Gloria’s. Again, Anthony resists any true revelation this episode might bring. Notably, Fitzgerald writes that Anthony wants especially to reach “the corners of his mind,” but ultimately resists this impulse and attempts a return to the superficial, specifically the details of his wedding the next day. As in the passage before, we see Anthony vacillating, at the point of insomnia, between a revelation of and resistance to his spiritual emptiness, as well as the living death he foresees as marriage to Gloria, and a desire to push this revelation back into the unexplored corners of his (un)conscious mind. Though in this passage, Anthony does indeed fall asleep, the sleep is incomplete, as when he awakes “it [is] only five o’clock,” which upsets him because “he would appear fagged at the wedding” (150). His return to consciousness, after unfulfilling and incomplete unconsciousness, is greeted at once by a return to material and appearance-related concerns.
Anthony’s most insightful points of self-reflection come at a time when he is falling asleep, yet is neither fully asleep nor fully awake. Peter Schwenger refers to this time as “a zero degree of existence,” which, for him is “an existence preceding either the world’s categories or those that one determines for oneself in order to determine a self. Such categories, general or particular, fall away with the onset of sleep” (48). Schwenger’s analysis of the moment just prior to the onset of sleep helps to explain Anthony’s experience in the two situations I have just described. In these moments, he sees himself apart from the socialized role he fills, without the distractions of his life. He comes face to face with his most basic self and is horrified by the emptiness and grayness of that self and his choices, likening his existence to an empty bottle. Simon Wortham argues that the onset of sleep eliminates the distinction between the self and others (141). Perhaps, for this reason, during these periods of near-sleep, Anthony loses his ability to take comfort in his elevated social position. When he is awake, he can fall back on socially determined roles (though these roles become increasingly destabilized within the text) and use his social position to distract from who he thinks he might be or might want to become. But, with the onset of sleep, he is reduced to his most essential self, without the ability to compare himself to others, and does not like what he sees that self to be.

Thus far, I have explored Anthony’s insomnia on two levels. In one sense, the insomnia functions phenomenologically as a point of possible, yet refused, revelation for him. It allows him a brief glimpse into the parts of his consciousness that he has heretofore been denied access, posing the possibility of redemption, yet denying this redemption through an unwillingness or inability to press further. His experience of
insomnia is described as a struggle between revelation and denial, each time resisting revelation through a focus on the material. His constant return to a consideration of the tangible in his life points to his desire to mute considerations of the intangible elements of his existence that cannot be measured in economic terms. When he has insomnia, he stifles his thoughts that come bubbling towards the surface of his consciousness through a return to the trappings of his social status, whether it is an attractive woman, a stamp collection, or the plans for his wedding day. In another sense, the insomnia functions symbolically as a representation of Anthony’s liminal existence, as a man who has higher philosophical and spiritual aspirations, but neither the desire nor drive to define or attain them. He has the intelligence to recognize the futility of his life, but does not use this intelligence to alter its course. He is also a liminal figure in the sense of his ability to depend on others. Through much of his life, he has never had to work to earn a living, and was always cared for by his grandfather, so is fully dependent on that grandfather for his subsistence. Yet, the sort of stable dependence that would allow restful, comfortable sleep (the kind Gloria wants) eludes him, and his relationship with his grandfather remains tenuous. As secure as his life has always been, his future is equally insecure.

**Women as Remedy**

He hopes that Gloria will allow him to sleep, and uses her to allay his insomnia, just as he will use Dot, a woman with whom he has an affair, later in the text. When he first meets Gloria, she is described as “the end of all restlessness, all malcontent” (107). Shortly after the purchase of their country home, she “had lulled Anthony’s mind to sleep” (191). So, her influence at times seems promising, as
though she will give him the peace he desires; he wants to slip into the routine of married life with Gloria, so he no longer has to make difficult decisions or force himself to change with hopes that being a husband is enough for him. However, despite Anthony’s perceptions of Gloria as a soporific agent, the text indicates that she will ultimately do more to disrupt his sleep than enable it. For example, when he is nodding off while contemplating the emptiness of life, it is Gloria’s visit that awakens him (55). When he thinks of her dating other men, he cannot sleep (123). When he goes on a date with her, he is unable to sleep the whole night afterwards (127). When he is about to marry her, he cannot sleep on the eve of his wedding (129). After they purchase their new home, they stay awake all night with excitement (178). And, after she and Anthony fight, he “stayed awake to brood upon the day, vaguely angry with her, vaguely dissatisfied” (210). Gloria contributes more to Anthony’s insomnia than helps it. She is not the solution he needs to allow him the rest he desires.

Seemingly, Anthony’s insomnia is an ontological condition, bound up with his anomic conflicts of identity. But it is important that these issues of identity remain consistently tied to his social class and the position of members of his class in American society at the time period before and after World War I that the text covers. His wealth at a young age affords him the privileges of time and study to gain insight into life, yet, at the same time, prevents him from leading what he knows would be a more meaningful life. Both the ontological and phenomenological aspects of Anthony’s characterization as an insomniac are intrinsically connected to his social class, and this connection via insomnia contributes greatly to the social critique
Fitzgerald includes in this text. According to Craig Monk, though Fitzgerald minimized the novel’s political intent, “his fiction seems, at some level at least, concerned with problems related to the political developments of the post-war era in the United States” (69). Monk describes the political statement of this text as connected to “the disillusioning realization that there are limits to human accomplishment” which “was the lesson learned by all liberals as the lasting realities of the post-war period became manifest” (70). Once liberals lost political power after World War I with the election of Republican candidate Warren Harding in 1920, their dreams of exerting powerful influence over the shaping of post-war Europe were thwarted by a movement to international isolationism (Monk 61). Just as Anthony understands the power and influence he might have in his life, he realizes the futility of those same hopes, understanding that they will never be realized, similar to the failure of liberals to exert influence over world affairs and really make a mark in Europe. His insomnia, symbolic of this struggle, also becomes symbolic of the anomic tensions of his generation, which struggled between the desire to shape world affairs and the inability to do so in a meaningful way.

Monk argues that “the war is the root of social disillusionment in the novel” (66). World War I provided “the restless generation” a distraction from the leisurely monotony of their lives, but once hopes of attaining influence and purpose from war participation were dashed, the war only became a source of destruction of hopes and dreams (66). Anthony has his own dreams related to the war; he enlists, hoping to fight, but more importantly, hoping to be killed: “It was all very purposeless and sad when Anthony told Gloria one night that he wanted, above all things, to be killed”
But even the idea of dying for his country (or himself) is futile. Through the war, he seeks both the unconsciousness and honor he desires, and again, Fitzgerald uses Anthony’s sleep to reflect upon the position in which Anthony places himself. In military camp, prior to being sent away to fight, Anthony can finally sleep with at least some hope of giving his life purpose and value. Fitzgerald writes, “For the first time in his life he could throw himself down on his cot between dinner and afternoon drill-call, and seeming to sink with each moment deeper into a bottomless bed, drop off immediately to sleep, while the noise and laughter around him faded to a pleasant drone of a drowsy summer sound” (318). His ability to finally participate fully in something, with a clear goal in mind, allows him to rest at last.

But even this rest is short lived for Anthony, and he again becomes restless. He begins an affair with a woman named Dorothy Raycroft, or more commonly, Dot, which “was an inevitable result of his increasing carelessness about himself” (324). Again, he realizes the futility of his involvement in the war effort and resumes his previous attitude of indolence and immorality, trying to assuage his restlessness through physical fulfillment. The affair with Dot is a result of his moral exhaustion and he unites with her for the same flawed reasons he marries Gloria: “The girl [Dot] promised rest; the hours in her company each evening alleviated the morbid and inevitably futile poundings of his imagination” (325). The initial sense of purpose joining the army allowed Anthony eventually culminated in his awareness of the futility of his actions. The futility of Anthony’s participation in the war perhaps reflects Fitzgerald’s sentiments on the false hope for influence the war fostered in America and the futility of those hopes. Once Anthony realizes that he remains
ultimately purposeless, he again becomes restless and seeks repose in the material, trying to stifle the “poundings of his imagination” that tell him he is again acting in a misguided manner. Dot becomes a new version of his stamp collection or his physical experience of his first moments with Gloria; she is a way to distract his mind so he can rest while conscious, but still does not provide him with the unconsciousness he so desires. Of course, the affair with Dot does not serve its purpose and renders Anthony only the most temporary comfort and happiness.

Consequently, Dot plays a significant role in the perpetuation of Anthony’s liminal state at the end of the novel. Thinking he has severed ties with her when planning his return from the war and the resumption of his marriage with Gloria, he is dismayed that Dot returns to him and threatens suicide. After speaking with her on the phone, Anthony “found himself walking slowly away, repeating over and over that it was futile to worry. He had best go back to his tent and sleep. He needed sleep. God! Would he ever sleep again? His mind was in a vast clamor and confusion” (347). The woman he hoped would help him rest, like all of his other feeble, lazy, and misguided attempts at happiness, perpetuates his insomnia. But, again, we see Fitzgerald employing the language of futility and sleep as an escape from worry, which Anthony needs, but cannot have.

**Insomnia as Ontological State**

Dot does not kill herself, but continues to inflict pain on Anthony even after his return from the army. His final fall, ironically coinciding with success in his lawsuit against his grandfather’s estate and the acquisition of the financial security he has always supposedly desired, comes just after Dot visits him in his apartment. Her
visit enrages him, and he threatens to kill her. Once she leaves, “a thick, impenetrable darkness came down upon him and blotted out thought, rage, and madness together—with almost a tangible snapping sound the face of the world changed before his eyes…” (446). That “snapping sound” represents Anthony’s final descent into a state of semi-conscious liminality, that denies him both full consciousness, but equally importantly, unconsciousness. He regresses into a child-like state from which he believes his grandfather to still be alive (447).

In the final paragraphs of the text, Fitzgerald describes Anthony’s condition:

Anthony Patch, sitting near the rail and looking out at the sea, was not thinking of his money, for he had seldom in his life been really preoccupied with material vainglory, nor of Edward Shuttleworth [his grandfather’s lawyer who committed suicide after the lawsuit], for it is best to look on the sunny side of these things. No—he was concerned with a great series of reminiscences, much as a general might look back upon a successful campaign and analyze his victories. He was thinking of the hardships, the insufferable tribulations he had gone through. They had tried to penalize him for the mistakes of his youth. He had been exposed to ruthless misery, his very craving for romance had been punished, his friends had deserted him—even Gloria had turned against him. He had been alone, alone—facing it all. (449)

The opening line of this passage is worth noting, as it reveals Anthony’s underlying disavowal of the material, though many of his thoughts and actions seem to indicate otherwise. The ironic tone of this passage, through the self-aggrandizement of his “insufferable tribulations,” indicates the dissonance between Anthony’s self-perception as victim and his role as perpetrator of his own misery. This final description of Anthony takes place during the day, and he is very much awake, but his state of consciousness is of an insomniac nature. His mind is not in the present, but rather travelling back through time and his thoughts become illogical and paranoid, simulating the train of thought one may have during a period of insomnia.
Most significant, though, is his sense of isolation, which is the same isolation of which one is aware during a bout of insomnia. He has a sense of being awake, yet utterly alone in the world, completely cut off from others and unable to communicate with them. His insomnia, in this passage, is a time of re-visitation, as it is for so many insomniacs, and, more significantly, it must take place in mental, if not physical, isolation. Sadly, it is the state in which Anthony will remain for the rest of his life, never able to reach the unconsciousness and attain the rest he desires.

Emmanuel Levinas describes insomnia in the following way:

Insomnia is constituted by the consciousness that it will never finish—that is, that there is no longer any way of withdrawing from the vigilance to which one is held. Vigilance without end. From the moment one is riveted there, one loses all notion of a starting point or finishing point. The present is welded to the past, it is entirely the heritage of the past: it renews nothing. It is always the same present or the same past that endures. A memory would already be a liberation with regard to the past. Here, time begins nowhere, nothing moves or shades off. (Time 48)

Levinas’ description of insomnia articulates Anthony’s mental state at the end of the novel. He is, indeed, “welded to the past,” preoccupied with not a single memory that might bring him some happiness, but “a great series of reminiscences.” His paranoia assures that he remains in a state of perpetual vigilance with no end in sight (other than his eventual death), and his present and past are inseparable. The closing section of the story makes clear that Anthony will never find relief from perpetual consciousness. In the preliminary statement of Studies in Hysteria, Josef Breuer and Sigmund Freud argue that in cases of hysteria, “all that is present is what might be called a symbolic relation between the cause and the pathological phenomenon, a relation such as healthy people form in dreams—so, for example, psychical pain is
joined by a neuralgia or the feeling of moral disgust by vomiting” (9). They assert that the hysteric expresses psychic trauma through physical symptoms. In combining the arguments of Breuer and Freud on hysteria with those of Levinas on insomnia, we can see a similar outcome in Anthony. Anthony, immersed in a perpetually liminal state throughout his life is condemned to this state in illness, unable to attain relief through unconsciousness which can bring the resolution and outlet dreams afford. In his life, he is trapped between conscious rationalizations of his actions and unconscious awareness of their futility, which he is never quite able to realize. His final physical state expresses this same sense of being trapped. He is physically immobilized and left mute, yet in a state of simultaneous awareness of his surroundings and delusion regarding his complicity in creating them. By the end of the text, his inability to express himself at all mirrors his inability to express to himself his own culpability in his final state. His physical immobility represents his psychical immobility through his failure to act in ways designed to achieve anything other than an untenable stasis, in which he will permanently remain.

Anthony’s insomnia and his social status are integrated in several significant ways. Firstly, his wealth facilitates his insomnia and his lifestyle cultivates it. Peter Baldwin, for example, notes the “uselessness” of the “pleasure seeking upper classes” especially as it relates to their ability to live nocturnally (81). Anthony embodies this sense of “uselessness” and exhibits it through his insomnia. He has the luxury of not being required to work, at least for his adolescence and young adulthood, which enables him to sleep and wake when he pleases, and he becomes fully immersed in the night life of the early part of the twentieth century. Everything
in Anthony’s life has been set up for him to require the least amount of effort on his part, including the cleaning and maintenance of his luxurious Manhattan apartment.

His one business requirement is his once weekly meeting with his broker, which “varied from semi-social chats to discussions of the safety of the eight per cent investments, and Anthony always enjoyed them” (12). His lifestyle allows him to stay up late at night, drink heavily, and live with a minimal sense of responsibility.

But, this “pleasant” sort of insomnia is a double-edged sword. Just as Anthony can enjoy a life with few demands placed upon him, the persistent knowledge of the emptiness of this lifestyle haunts him and exacerbates this insomnia. His dazzling life grows increasingly disenchanted, leading him to decisions that intensify his insomnia and trap him in the life he finds so depressing:

Over and against these things was something which his brain persistently analyzed and dealt with as a tiresome complex but which, though logically disposed and bravely trampled under foot, had sent him to a library which had none of the books he most wanted. . . . He found himself in a growing horror and loneliness. The idea of eating alone frightened him; in preference, he dined often with men he detested. Travel, which had once charmed him, seemed, at length, unendurable, a business of color without substance, a phantom chase after his own dream’s shadow. (54-55)

His hatred of his own life forces him not to make changes, but to continue along the same path, similar to the way in which an insomniac’s fear of insomnia can foster insomnia itself. The friction between his knowledge that he can and should be doing something more meaningful with the resources he has been given, combined with the knowledge that he has, is, and will fail at doing so, constitutes the anomic state of being that perpetuates his insomnia.
Anthony is an excellent example of the anomic individual. In the beginning of the text, he has the “means” to succeed in terms of wealth, but has never been taught to assert himself or actively pursue meaningful goals, so his needs and his internal means are out of synch. The more he tries to find a direction, yet fails, the more pain he experiences, eventually diminishing both his interest in trying at all and in living altogether. When he has lost his fortune, his desire to live comfortably, which is his fallback position, also becomes threatened, so he persists in a life he cannot afford without taking reasonable steps towards remedying the solution. He is trapped between maintaining an unfeasible lifestyle that he has been taught to expect and forsaking this lifestyle to become a more complete person. Yet, neither option, the wealth or the meaning, are within his grasp after his grandfather disinherits him. His desire to be successful on his own behalf ends up atrophied by the end of the text, much like his desire for material comfort.

Insomnia can trap the insomniac in this same anomic cycle which Anthony experiences throughout the text. An insomniac may plan a good night’s rest to be “productive” the next day, but another insomniac night can lead to another late morning and “wasted” afternoon. As we see with Anthony, this insomniac instinct comes to fruition after he finally does obtain a job to support himself and Gloria. Fitzgerald writes, “His determination to stay in at night during the week did not survive, and a good half of the time he came to work with a splitting, sickish headache and the crowded horror of the morning subway ringing in his head. Then, abruptly, he quit. He had remained in bed all one Monday, and late in the evening” (231). Quitting his job makes him “more depressed and discouraged than he had
been at any time since their marriage” (231), but this depression is not enough to change his behavior. He is part of a vicious cycle of expecting failure and disappointment, thereby creating failure and disappointment, much as expecting trouble sleeping creates trouble sleeping.

**Gloria’s Insomnia**

Just like Anthony, Gloria frequently suffers insomnia for a number of reasons. The vampiric Gloria, whose life’s aspiration is to “sleep” often finds herself unable to do so. She first exhibits signs of insomnia after her marriage to Anthony, likely as a result of her dissatisfaction with her life and the failure of this life to provide her the protection and rest she desires. According to Monk, “In the absence of true, lasting happiness, Fitzgerald’s characters seek solace in shallow pleasures... Finally, in desperation, Gloria embraces her mother’s belief in ‘Bilphism,’ in the education and reincarnation of the soul” (68). Monk argues that Gloria’s adoption of this new system of belief reflects a desperate attempt to rationalize her purposeless existence (68). She becomes interested in a spiritual other-world to distract herself from her spiritless reality, much in the same way Anthony uses his stamp collection as a child. As she argues, “it’s always seemed to me that if I were unconsciously learning something here it might not be so meaningless,” to which Anthony replies, “You’re not learning anything—you’re just getting tired” (303). She needs the other-world to give hope to her everyday world. Appropriately, one of the first descriptions we get of Gloria’s insomnia comes because of the adaptation of this system of beliefs:

Gloria’s penchant for premonitions and her bursts of vague supernaturalism were a surprise to Anthony. Either some complex, properly and scientifically inhibited in the early years with her Bilphistic mother, or some inherited hypersensitiveness, made her
susceptible to any suggestion of the psychic, and, far from gullible
about the motives of people, she was inclined to credit any
extraordinary happening attributed to whimsical perambulations of the
buried. The desperate squeaking about the old house on windy nights
that to Anthony were burglars with revolvers ready in hand
represented to Gloria the auras, evil and restive, of dead generations,
expiating the inexpiable upon the ancient and romantic hearth. One
night, because of two swift bangs downstairs, which Anthony fearfully
but unavailingly investigated, they lay awake nearly until dawn. (187)

Where Anthony turns his attention to the material (threats of robbers), Gloria remains
fixated on the materialization of the other-worldly. Hearing what she feels to be
ghostly noises, she is unable to sleep, especially because she feels unprotected by
Anthony and his “unavailing” efforts to keep them safe, which, of course can be read
as symbolic of the state of their marriage. If we look at her spirituality in terms of her
efforts to distract herself from the problems of her earthly life, her insomnia can be
interpreted as a desire to experience the spiritual for some sense of fulfillment. She
refers to ghostly acts as “whimsical” and relates them to the “ancient and romantic”
hearth in her home; these are hardly suggestions of fear, but rather a romanticized
world view that offers a somewhat pleasant, if at least amusing, alternative to the
restful sleep she is denied.

Aside from other worldly concerns, Gloria suffers from insomnia for very
worldly reasons. In one case, after Anthony is disinherited by his grandfather, Gloria
lies awake contemplating the effects of aging on her appearance: “As the long night
waned she grew supremely conscious that she and beauty were going to make use of
these next three months [until her twenty-ninth birthday]” (393). She is especially
concerned with aging for financial reasons, even over those of vanity. Now that
Anthony has no money, she hopes to earn her living through one of the limited means
available to women of her class and education: she hopes to become an actress. She knows her looks are the only path to this career. Unfortunately, her poor sleep of the night before makes her ill for an extended period of time, and she defers her plans of auditioning until the week before her birthday (394-95). Her hopes of being on the screen remain unrealized when she is passed over for a “younger woman” (403).

Gloria also suffers from insomnia when Anthony leaves for the army to prepare to fight in World War I. Fitzgerald writes:

Two o’clock saw her dry-eyed, staring with steady persistent grief into the darkness, remembering, remembering unmercifully, blaming herself for a hundred fancied unkindnesses, making a likeness of Anthony akin to some martyred and transfigured Christ. For a time she thought of him as he, in his more sentimental moments, probably thought of himself. (361)

Again, her insomnia is related to her position as wife of a soldier, but more importantly, it provides her an opportunity to empathize with her husband. Interestingly, however, the empathy she cultivates about Anthony is of a delusional nature, as he is far from a Christ figure, living his life in order to avoid suffering, rather than to sacrifice for others. Even his enrollment in the military was a means of avoiding suffering and finding permanent unconsciousness rather than an act of valor and self-sacrifice.

Thus, for both Anthony and Gloria, insomnia and social position are interconnected in complex ways. The lifestyle they have which allowed them to sustain insomnia for years in relative comfort eventually prevents them from adjusting to new circumstances when their comfortable lifestyle is denied to them by Anthony’s grandfather. Further, the conflict between Anthony’s aspirations and his actual capability to fulfill those aspirations leave him trapped in a liminal state
between wealth and poverty, action and inaction, and distraction and despair.
Likewise, Gloria’s disillusionment with Anthony’s ability to reform keeps her trapped in a marriage which she still hopes will someday be restful. The “restlessness” Weber describes as part of the motivation of Western capitalism and the insomnia of aspiration described by Fitzgerald exist within Anthony, yet instead of acting on this restlessness with the goal of what he would consider a “meaningful” achievement (he does not exactly know what this means, which is part of the problem), Anthony attempts to stifle that restlessness through his lifestyle. Gloria, instead of making him accountable for his inaction, retreats into her own other-worldly belief system and resorts to what Fitzgerald calls “the negative principle ‘Never give a damn’” (203).
When their affluent lifestyle fails them and they can no longer be distracted from their problems through parties and alcohol, Anthony’s mind snaps completely, leaving him in a state of continuous mental and emotional waking isolation. Gloria is forced to become his babysitter, and live as a woman who appears to others to be “sort of dyed and unclean” (448). For both, the makings of their fallen state and hints at the futility of their attempts to avoid their fall are apparent in the nature of the insomnia they both experience throughout the novel.

**Insomnia of Limitation**

Much like Anthony Patch, Waldo Frank’s character, Virginia Hade experiences an insomnia of anomie. In order to explain the wealthy and white Virginia’s insomnia, we can compare it to the impoverished, black John Cloud’s untroubled sleep, as the text itself does. Toni Morrison argues that with regard to issues of race implicit or (less frequently) explicit in literature: “[T]he subject of the
dream is the dreamer. The fabrication of an Africanistic persona was reflexive; it was an extraordinary meditation on the self, a powerful exploration of the fears and desires that reside in writerly consciousness, an astonishing revelation of longing, of terror, of perplexity, of shame, of magnanimity” (208). Frank illustrates this type of meditation through the thoughts of Virginia, a white woman. Virginia uses John, both literally through her accusations of rape and assault, but also metaphorically, as a vehicle through which she can express her own fears and desires. Morrison continues:

There is no romance free of what [Herman] Melville called ‘the power of blackness,’ especially not in a country in which there was a resident population, already black, upon which the imagination could articulate the fears, the dilemmas, the divisions that obsessed it historically, morally, metaphysically, and socially. This slave population seemed to volunteer itself as objects for meditation on the lure and elusiveness of human freedom, on the outcast’s terror and his dread of failure, of powerlessness, Nature without limits, inborn loneliness, evil, sin, greed. . . ; in other words, on human freedom in all terms except those of human potential and the rights of man. (211-12)

Virginia embodies, through her insomnia, this sort of articulation which Morrison applies to the Romantic text more generally. John becomes for Virginia an object of contemplation, but she does not contemplate John as a unique individual, but as a relative being, exposing her own limitations and anxieties and idealizing the freedom and limitless nature that he purportedly represents. She uses him for the purposes of her own attempts at self-awareness and escape from her own perceptions of bondage.

Though, in many ways Virginia and John are reflections of each other in terms of the freedom of body they desire, John’s very clearly defined social role with no prospect of mobility enables him to sleep well. This is not to say John is content in his lower position or to glorify his social status in any positive way, but if he is not
content, he is stable. He does not lose any sleep over the possibility of wasted aspirations because he is all too clear on the limits to which he can aspire; whereas, Virginia’s ability to grasp at mobility, while facing the reality of her immobility, renders her sleepless. On some levels, Virginia envies John’s security of social position (however insecure this position makes him in terms of security of personhood), and, rather than attacking those who oppress her (the white males who surround her), Virginia lashes out against John because it is only against him that her words have authority. She attempts to assert power not by resisting the racist and misogynistic hegemonies of the American South in the 1920s, but by becoming the epitome of Southern social paradigms, however falsely contrived her position is: the helpless woman victimized by the sexually violent and immoral black man who needs the white males around her to seek revenge on her behalf. Through his text, Frank critiques the social system that cultivates and perpetuates such paradigms.

Frank both asserts and resists these paradigms through the names of the primary characters. Virginia Hade’s name is reminiscent of both the South itself (the state of Virginia) and hell, with the closeness of her surname to Hades. Thus, her name conflates southern-ness and descent into the underworld. As Morrison notes, “racial ideology” affects not only the racialized “other,” but also “the mind, the imagination, the behavior of the master” (208). Frank illustrates this effect in terms of moral and physical damnation itself. Conversely, John Cloud’s last name invokes connotations of ascent and transcendence. The name “John” comes to represent the everyman, not the “other” but the average. For Frank, he is symbolic of the norm
rather than relativity to a norm. He is the standard of comparison; whereas Virginia’s name is rooted in relativity to her place in the South.

Despite Virginia’s abuse of John, she realizes she is merely falling into prescribed roles and perpetuating, rather than challenging the cycles of racism, sexism, and violence that permeate her world and damn her soul. Her daytime actions are in accord with the corruption of her values equated with life in the South, but her insomnia reveals both her knowledge of her own corruption, as well as her awareness of the need to resist those very same values she ultimately ends up reifying. Our first introduction to Virginia’s inner consciousness begins with her insomnia: “Virginia Hade lies in her broad mahogany bed, awake. – I am afraid of sleep. That’s why my eyelids tremble and burn; that’s why my hands hold rigid on my brow” (64). Her insomnia makes her aware of her physicality, but more importantly that her physicality (white womanhood) is corrupt, as she thinks, “There is a poison in your body, and it lurks in knots. If you draw in your leg, the poison lingers” (64). Later, in the course of her insomniac train of thought, she thinks, “—Lord, won’t You let me sleep? Look: I’m stretched out. The poison can flow away, if only You’ll let it. . . . —Sleep . . dream world . . writhing shapes writhe out And stand upon my breasts And stand upon my mouth Forcing my lips!” (67). This “poison,” or perceived corruption of her body, manifests itself most fully in her awareness when she tries to sleep and has only herself and her body with which to contend. She is aware that the very movements of her body influence the movement of her supposed internal corruption. The way in which she describes both her
insomnia and feelings of corruption also have religious implications, as she looks to
God for both sleep and purification.

Her insomnia is also intrinsically connected with her work on her family’s
plantation. She thinks:

Is it wrong to work? How hard I work… Bob is a loafer, and Papa’s a
Judge. … Ticketing Answering mail Billing and crediting and
shipping Sending the sugared fruit to the sour North. What does it
do but wear away The shell of sleep The shell of ease, Baring the
nerves that hunger! Tiring my mind, tiring my decency So that my
soul lies naked under this black night! (65-66)

In this passage, she presents her work as essentially unsatisfying, but also
contributing to a restlessness of the soul that prevents her sleep. She sees her work as
“tiring her decency,” and, therefore, seems to understand her own role in the South’s
moral corruption and exploitation of black laborers. Her work also pits her against
her white family members who do not have to work as hard as she does, revealing the
inequality of her relationship with the white males in her life. She must work to earn
a voice in her family, but her father and brother do not have to do the same. They can
merely observe and pronounce judgment, be heard without having to earn a voice.

The most interesting points of Virginia’s insomnia revolve around her heavily
racialized (and racist) view of the night. Race, for her, is conflated with both the
darkness of her soul and her sexuality, highlighting the main tensions she faces
throughout the text, and culminating in her duplicitous instigation of John’s lynching
and murder. She refers to the night as “a raping nigger!” (66) and considers that “the
night . . . Breeds niggers!” (68). Despite her use of overtly racist language, she
seems to possess an understanding of the falsity of her description of the night as a
“raping nigger” and the association of blacks with nighttime. Just as John Cloud is
falsely accused of and murdered for rape (he is NOT “a raping nigger” as she and others characterize him), she sees “darkness” within herself rather than as part of the racialized “other.” She asks, “Why can’t I sleep? Are my insides dark? Will they flood out if I sleep, Wash my white soul black?” (69), hoping for a transformation of her soul. Then, she finally declares, “My soul’s not white! Death’s white: my soul wants to live. . . . Soul, you’re a little black babe under my heart” (70). The thoughts that conclude this monologue indicate that, for Virginia, it is not the perceived “blackness” within her that becomes a force of death, but is instead equated with her desire to live without restraint. Here Virginia is making use of what Morrison refers to as “a fabricated brew of darkness, otherness, alarm, and desire” (212). This association with internal blackness allows her to “employ an Africanistic persona to articulate and imaginatively act out the forbidden in American culture” (Morrison 224). She wants to act in ways that are forbidden to her because of her whiteness and femininity, but articulates such desires in terms of their “blackness” reflecting both her resistance to and internalization of racist social norms and beliefs.

The language of the section of the text that depicts Virginia’s insomnia structurally recreates in readers the insomniac experience. Throughout this section, the language is abrupt, both fixating on various ideas and flowing freely from image to image. The section contains very little finite punctuation, mostly relying on the use of question marks, exclaimations, and ellipses, rather than full stops. The chaotic, flowing nature of this passage reflects the turmoil and tension within Virginia’s mind, as well as her conflicting views on race and gender. Virginia is herself a liminal character, given the privileges of white skin and wealth, but the disadvantages and
limitations of femininity. If we look at Virginia in terms of Durkheim’s theory of anomie, we can see a clear conflict between the desire for autonomy denied to her because of her gender and the power and freedoms afforded those of her race and class. At the same time, she understands that blacks have their own power as well, and this power angers her. After stabbing herself with John’s knife, she says, “But I am strong, John Cloud. Have no fear. I’ll meet you at your height” (183). John, for Virginia, despite his low social status, has perceived freedoms she does not and can command attention she cannot. After watching him swim in the hot summer afternoon, she says to him, “I’d love to do that too. Run free. Ride free. Swim free… Be free, John, too” (164). John is, of course, very far from free on many levels. He knows that so much as a misinterpreted glance at a white woman could mean his doom (and a false accusation by one is his doom). His body is under constant scrutiny and control. Yet, Virginia perceives his ability to use his body in ways that she interprets as free because they are denied to her as the height of freedom. She cries, “I am John Cloud” (170), but the knowledge that because she is a woman, she cannot and never can be John Cloud causes her to destroy him though an attempt at destroying herself, as she stabs herself with his knife, representing both a sexual act and act of self-destruction.

**John’s Sleep**

Unlike Virginia, John is very sure of his position in the world (surety and content should not be confused, however). He acknowledges that “the cabin ‘n’ the swamp is chokin’ me” (21), yet he tells his mother “how lovely is our world. . . . Don’t you see how I loves.. how I loves.. our land!” (23). His land is equated with
the nighttime: “Our land! Our night, it is! Our breathin’, singin’ world!” (24). On the other hand, the world of whites is not nearly as harmonious. When describing night in the white part of town, John says, “Yo’ ought to see the night yonder on Main Street, Mammy. Night’s all broken with jagged ugly lights. Night’s runnin’ away from Main Street, all de time. It’s our night, Mammy, an’ it’s our red lan’” (24). He does not want what the whites have, so there is no sense of “aspiration” to be like those he cannot be, but more importantly, he does not aspire to have what the whites have because he does not want what the whites have; he sees it as corrupted. While John’s social position is untenable, his assurance of himself and relationship to the world around him is secure. When he dives into the water, which is described as both sleeping and somnolent (138), he can experience pure, physical ecstasy, something denied to Virginia because of gender limitations placed upon her experience of her own body. But, for John “An ecstasy is air, kissing his arms, his shoulders, lipping his chest as he flings off his shirt. An ecstasy is air, clasping his thighs, his stomach, his legs. John stands naked in the clasping air, between earth and water .. drinking the air he needs” (139). The physical world does not frighten him as it does Virginia, but rather affords him both pleasure and sustenance; it gives him all he needs. Despite his social immobility, he is able to experience his physical body, and through this body a perspective of connectedness with the land on which he lives and work, that Virginia is alienated from.

After a long day working, John sleeps well. While Virginia tosses and turns, struggling with hatred of herself and others, John declares to himself, “My flesh is whole!” upon lying down on his cot, listening to the sounds of the night outside from
the porch of his house (60). For John, “Sleep is a sure peace whose balm lies swiftly near and casts its magic even upon the day. John is awake .. but easeful in his waking. Sleep is near . . . John feels the alchemy whereby this pent black world, drenching in ignorance and pain and soil, shines fair” (61). The time before sleep, which to Virginia reveals corruption and violation, shows John something entirely different. John clearly sees the “ignorance,” “pain,” and “soil” of the world, but the night, specifically the time before sleep, provides an end to this worldly suffering and exposes the possibility of a beautiful life. As he falls asleep, “His body lies prone and sweetly wakeful within the magic of his folk” (61).

He is lying in bed awake, but the wakefulness is both short lived and pleasant for John. As with Virginia, we get a transcript of John’s inner monologue, but unlike Virginia’s, his is both coherent and replete with peaceful images. For instance, he thinks, “There’s a white dream that stands between my mouth and Mary’s, A white sunbeam in my soul. I’ll climb it. That’s what it’s fo’! I’ll vault with the white sunbeam! Empty pale world .. world of the Free, Wait till I come an’ warm you: wait till I come an’ fill you” (62). Rather than a conflict with his physical self, John experiences a sense of both peace and hope. Whiteness, which for the white Virginia is evil, is for John an obstacle whose conquest could be glorious. He neither exalts nor vilifies whiteness, but sees it simultaneously as an obstacle to freedom and a means to it as well. Night is the time when he can envision his necessary place in the natural, rather than social, world, and this presence is a positive one, rather than Virginia’s “black” and “poisoned” vision of herself. John’s monologue is also much shorter than Virginia’s as he quietly and peacefully falls asleep. As Frank writes,
“Night is not made for thought. Fantasy dances in oblique moon-motes. Vision tides like a sea upon the tree-tops, drenching darkness in magic. John is asleep” (63). As he is not his own enemy, neither is the night, and he does not have to fight for sleep. Night returns him to harmony with the natural world around him and leaves the concerns of the social world for the daytime.

**Sleep and Death**

Virginia cannot indulge in the same fantasies as John, nor can she feel as comfortable with her body as he does in this scene and the one in the water; or, perhaps she can but is socialized against doing so. In order to do so, she attempts to become John, first by kissing his girlfriend Mary, then by observing John’s naked swim and commenting on his body, and finally by stabbing herself with his knife (the sexual suggestiveness of this action is significant). But, Virginia cannot become John, fails in her half-hearted attempt at suicide, and ultimately destroys what she cannot be by instigating a riot and allowing John to be lynched by not speaking the truth. As John’s lynching occurs, Virginia again experiences insomnia, but insomnia which indicates the possibility of a sense of peace engendered through her actions. Initially, she feels at peace, as Frank writes, “She lies at ease within her bed,” but this peace is short lived as she becomes “concerned in her own quiet” (227). She becomes increasingly conscious of her body again, watching “a toe thrust up within the sheet” (227). Despite her initial sense of peace, she starts to question herself: “Why am I not waiting also? What am I so quiet?” “But,” writes Frank, “she knows she is not waiting. She is replete. She can stir a toe and watch it lift the linen” (227).
Though she remains “lying quiet in her sheet” the questions in her head become louder and more persistent: “Did I make it?” “Dare I stop what I did not create?” “Will I go [save John Cloud]?” “And what is ‘saving’? And what is ‘John Cloud’?” “Who made this wound?” “Will I go?” “Am I down there? Am I your victim, John?” “Did you make the storm of Nazareth that hunts you? make it to hunt you? make me make Nazareth hunt you?” (229). The silence that she had previously experienced is now punctuated by Frank’s interjection of “Murmur. Murmur” (229). She becomes both increasingly awake and frenetic and more aware of her body. The murmuring ceases and silence returns, but again it is short lived. This time, the silence is punctuated not by a murmur, but by a howl. Frank writes, “The shutters of her room shiver: HOWL .. bursts in her room” (230) breaking any sense of silence and peace she once felt. Her final question is “Will I go?” (230). She does not go, and John is attacked by an angry mob and immolated. Finally, while John is burning to death, Virginia does sleep: “Virginia, soothed by the silence, sleeps in her bed” (233). She finds the rest she wants, but readers are left with the sense of the futility of the temporary peace she has found as she will have to live with knowledge of her responsibility for John’s death.

In Frank’s text, insomnia is used as a structural device to illustrate one’s ability to be at peace with his or her place in the natural and spiritual world, or, rather to transcend or fail to transcend that place. John can transcend his social status in the time before sleep and envision a grander image of the world’s potential beauty. These moments of realization and peace come as he falls asleep, not exactly experiencing insomnia, but instead a winding down of his thoughts. Because he is
allowed these moments of transcendence, yet also realizes their practical limitations, he does not experience the same level of anomie Virginia does. He already has what he desires and has already learned the limits of his desire. Virginia, on the other hand, is in a double bind. She is allowed some of the benefits of wealth and privilege, but denied a more spiritual and physical relationship with the world around her through her body as John has. My argument here is not that John is somehow “closer to nature” than Virginia, but rather that John understands, in a way Virginia does not, the superficiality of social hegemony and is able to find solace when he is removed from society, which primarily takes place at night as he is trying to sleep. John is frustrated and angered by the constant corruption he faces, but he does not allow that corruption to reach the core of his being, as Virginia, with her greater complicity, does. The expectations placed upon her by the white males around her force her to simultaneously resist and participate in contemporaneous social hegemonies. She attempts to transcend both race and gender, but when that fails, she falls back on the stereotype of the innocent white woman victimized by the sexually aggressive, animalistic black male. Of course, John is neither sexually aggressive nor animalistic, and Virginia knows this to be the case, yet uses these classifications to destroy him. She wants to be what she thinks he is, but because she does not truly understand what he is because of racial and sexual barriers, she can only be a force of destruction, both of herself and John. These tensions within Virginia’s mind prevent her from sleeping until what she cannot be or have is gone. Insomnia reveals the struggles of gender and class Virginia faces and the limited and horrific options she has to feel a sense of power.
Insomnia in the Colonial Text

Virginia Hade and John Cloud live in an American society rigidly divided along lines of race and class, and, as such, their sleep is related to their disparate positions, drawing attention to both what makes them different, as well as what makes them alike. We see a similar paradigm in British literature with regard to sleep in colonial societies in E. M. Forster’s novel *A Passage to India*. Frantz Fanon, in his essay “Colonial War and Mental Disorders,” argues that colonialism itself creates psychological disorder: “in this war psychiatric phenomena entailing disorders affecting behavior and thought have taken on importance where those who carry out the ‘pacification’ are concerned, or that these same disorders are notable among the ‘pacified’ population” (249). In his essay, Fanon describes countless cases of mental disorder related to colonial practices. One common feature discussed in many of these cases is the subject’s insomnia. As Fanon argues, “It is the painful, suffering body that calls for rest and peace” (289).

As I noted earlier, oppression affects not only the oppressed, but also the oppressor. It is a force of corruption for all involved. Yet, even the oppressed are not without some power. As Foucault argues, “Power comes from below; that is, there is no binary and all-encompassing opposition between rulers and ruled at the root of power relations, and serving as a general matrix” (*History I*, 94). In other words, the exertion of control over others requires also an exertion, if not exhaustion, of energy and resources to affect that control. The ability to require this assertion of resources is a form of power to which oppressed classes have access and resistance to control requires further exertion on the part of ruling classes. In a sense, the oppressed force
the hand of the oppressor, determining action in order for the oppressor to perpetuate domination. But the cost of this exertion is often damaging to the oppressor, as well as the oppressed. For Forster, the oppressive, colonial system in India brings out the worst in people, corrupting and harming both the rulers and ruled. As Adela Quested thinks of her fiancé Ronny Moore, “India had developed sides of his character that she had never admired” (80). His position of authority in India damages his character, causing his corruption through his efforts to exert control over subjects.

In *A Passage to India*, Forster places the country of India itself in a similar position as John Cloud, where India is both the oppressed and the source of tension for its oppressors. Fanon argues that in a colonial system, “The colonized people find that they are reduced to a body of individuals who only find cohesion when in the presence of the colonizing nation” (294). Forster illustrates Fanon’s argument through his personification of India itself, as described through the view of the British, for whom he writes, “This pose of ‘seeing India’ … was only a form of ruling India; no sympathy lay behind it” (306). The British constantly attempt, and fail, to see India as a unified whole. “Seeing India” for Forster means dominating its people by authorizing them through interpretation, so they are seen not as individuals but as a whole nation, much in the way Virginia sees John Cloud as an image of her own racialized fantasies of physicality and sexuality, using him through her depictions of him, rather than using her depictions to understand him as a unique individual in any meaningful way.

Forster describes India in terms of its liminality, being almost asleep and restlessly awake, beginning each of the novel’s three sections with a description of
the country itself. He further characterizes India as being in a paradoxical position of being incredibly ancient, yet not fully formed. Of this novel, Edward Said argues, “Forster’s using India to represent material that according to the canons of the novel form cannot in fact be represented—vastness, incomprehensible creeds, secret motions, histories, and social forms” (200). The country is massive, yet the characters are often claustrophobic. There is a deep spirituality underlying the pettiest of political quarrels. India is represented in the novel at multiple levels, including the level of the social, exposing systems of domination, but also the spiritual, as we learn that Mrs. Moore comes to India with “an easy” goal: “To be one with the universe!” (208). In attempting to realize this goal, vague and clichéd in its presentation, she uses India as the subject of her self-reflections, again in a way similar to Virginia’s use of John. India becomes the land through which both its inhabitants and visitors attempt to connect with spirituality, yet also find out how distant spiritual understanding is because India is only imagined in terms of their own conceptions of spirituality, rather than on its own terms. They can never “see” India because their vision of India is always occluded by their vision of what India represents in Western culture. At the opening of the book’s third and final section, Forster writes, “God is not born yet—that will occur at midnight—but He has also been born centuries ago, nor can he ever be born, because he is Lord of the Universe, who transcends human processes. He is, was not, is not, was” (283). We have in this passage the language of paradox and incomprehensibility; as long as the characters remain human and view the world through their human biases and preconceived ideas, this paradox cannot be resolved.
Forster situates this conception of God at a liminal moment, both on the verge of awakening (being born) and sleeping (having been born centuries ago—perhaps now exhausted or unconscious). If we look at the moment of falling asleep as Jean-Luc Nancy describes it, a falling away of the self from the self, Forster’s God exists in this moment of the simultaneous “is,” “was not,” “is not,” and “was.” In other words, God exists on the threshold between consciousness and unconsciousness that humans cannot grasp in their experience. As Glen Allen argues, India “has no unity itself” (937). Yet, in the novel we have two characters in particular who attempt to reconcile the ancient India with the new and developing (rather than developed) India: Dr. Aziz and Mrs. Moore. Aziz is an Indian native, yet attempts to befriend and embrace the British nationals who now control and inhabit his country. He wants to see a peace brokered and puts himself on the front lines. Mrs. Moore, on the other hand, is a visiting British national, but different in that she shows deference for Indian culture (for example, she removes her shoes before going into the mosque with Aziz) and sympathizes with the native inhabitants in a way the other British characters largely fail to do. These are the two characters who experience insomniac states the most significantly throughout the text. Their insomnia, then, can be interpreted as an attempt (a failed attempt, as Forster suggests any attempt to “understand” India would be) to comprehend the significance of India itself and its liminal place in the world. They are not merely sleepwalking through the country, turning their eyes from injustice. Forster writes, “Inside its cocoon of work or social obligation, the human spirit slumbers for the most part, registering the distinction between pleasure and pain, but not nearly as alert as we pretend” (132). If most of the characters, then, are
merely slumbering their way through life, it becomes significant to note the observations of those who experience troubled sleep, like Aziz and Mrs. Moore.

Allen argues that much as in the West, “light and sun imagery in Hindu philosophy is associated with intelligence,” yet, “Forster [in a scene describing a match illuminating the Marabar Caves] is pointing to the inadequacy of intelligence or reason in its effort to discover within the limits of its categories the ultimate nature of the universe” (943). Given Forster’s conception of the failure of light to render all things comprehensible, it is important that Aziz’s and Mrs. Moore’s contemplations take place in the dark and in a space of consciousness between “enlightened” daytime thought and unconscious thought. When Aziz is ill with a fever, for example, and he dozes, “his thoughts wandered over the varied surface of life” (101). Life is not cohesive and continuous for Aziz, but rather infinitely complex. Sitting awake in bed conversing with Fielding, who has visited him, Aziz is able to clearly articulate the position on India of many Westerners: “Here’s your home. . . . Here’s the celebrated hospitality of the East. Look at the flies. Isn’t it jolly? Now I suppose you want to be off, having seen an Oriental interior” (115). Aziz understands that for many Westerners, “seeing” India is merely an accretion of experiences with no true consequential empathy. However good their intentions may be, for Westerners, seeing is equated with domination and “real” Indian life becomes a sort of side show for cultural amusement.

Mrs. Moore has a similar realization, when, exhausted, she is hoping for a nap, but kept awake by Adela’s conversation. Forster writes, “She felt increasingly (vision or nightmare?) that, though people are important, the relations between them
are not . . . centuries of carnal embracement, yet man is no nearer to understanding man” (135). Like Aziz, she understands that to “see” something is not to empathize with it, and the reliance on imposed social boundaries can only separate people from each other. Forster’s use of “vision or nightmare?” in this passage points to the ephemeral nature of Mrs. Moore’s revelation. It is not an “enlightened,” daytime thought, but a truth revealing semi-hallucination brought about by exhaustion. It is the type of realization only made possible without the full use of consciousness, or, rather, beyond the limits of daytime consciousness. Upon leaving India, Forster describes Mrs. Moore as having “had come to that state where the horror of the universe and its smallness are both visible at the same time—the twilight of the double vision in which so many elderly people are involved” (207). She is able to see the universe in terms of irresolvable paradox, which Forster notes involves “the twilight of double vision,” and seems to imply that seeing the universe means simply understanding that it cannot be seen singularly. The view itself is uncertain and associated with the space between light and dark, consciousness and unconsciousness.

When she abruptly awakens in the middle of the night during her departure from India, she fully understands its incomprehensibility: “‘I have not seen the right places,’ she thought . . . ‘So you thought an echo was India; you took the Marabar caves as final? . . . What have we in common with them, or they with Asirgarh?’” (209-10). She understands the failure of the “cohesion” colonizers assert over those whom they colonize. India cannot be a singular experience, something reducible to an overall sentiment or epiphany gathered through a series of cultural observations, but is rather a combination of binaries and contradictions. Just as we only “know”
sleep because we are not awake and know waking only as not being asleep, India can only be “known” through being unknowable. In a sense, it is similar to the Kantian sublime; what we can comprehend points to something beyond comprehension, only approaching comprehensibility through its very incomprehensibility.

Where Mrs. Moore’s attempts at understanding India take place on a semi-spiritual level, Aziz’s understandings are more bound with social liminality. For example, even after his name has been cleared in the trial over the assault on Adela, his sleep suffers. He says to Cyril Fielding, “It is those who stop in the country, not those who leave it, whom such a story [of his alleged attack on Adela] injures. Imagine my dismay and anxiety. I could scarcely get a wink of sleep. First my name was coupled with her and now it is yours” (272). This passage expresses Aziz’s understanding of relations between the British and Indians. His knowledge of the perceived harm done through the linking of a British citizen’s name with that of an Indian, despite his earlier efforts at befriending the British and Fielding’s statements to the contrary indicate that he has come to understand, in part through his insomnia, the incompatibility of the two cultures on the colonial front. He knows his name has no power beyond India, as “those who leave it” will not be affected by such a coupling, but understands that while in the country, Indian-British friendships are unsustainable. Because association with his name cannot harm those who leave, these damaging relationships exist only within and because of the colonial regime.

Forster, like both Fitzgerald and Frank, has a dual purpose in his use of insomnia. On one hand, a character’s insomnia reveals the liminality of their position, social or spiritual. Mrs. Moore comes to India to find answer to her own
spiritual questions, but realizes, through her insomnia that those questions cannot be answered, and the practices of Indian governance interfere with such revelations. Aziz, who at first hopes to become the friend of the British, realizes, also during states of insomnia, the futility of such efforts so long as a system of colonial domination is in place. On the other hand, insomnia not only exposes the liminality of belief, but also the liminality of social position. Mrs. Moore has come to India to view Indians as equals, and ultimately cannot do so. Similarly, Aziz hopes to foster a sense of equality between Indians and British, but also fails. They are both positioned between the two disparate societies. As with Fitzgerald’s Anthony Patch and Frank’s Virginia Hade, insomnia is symbolic of the character’s liminal social position, with hopes of mobility but not access to it, but also evidence of the character’s ultimate uncertainty about their ability to give their lives the meaning they desire because of their social position; thus, insomnia has both phenomenological associations, as it is a part of their everyday experience, and ontological ones, as it reflects their state of being in both the social and spiritual world. In essence, insomnia unites these two worlds, illustrating that they cannot and refuse to be separated from each other.

**Insomnia and Female Labor**

Thus far, I have discussed insomnia as it relates to those in a position of liminal and precarious states of privilege, specifically dealing with those who have hopes of social elevation but face serious obstacles to such attainments, as well as those, like John Cloud and Mrs. Moore, who see the disconnection between social aspiration and meaningful spirituality. However, to be fair, insomnia has a more utilitarian side, and it also strikes the under-classes, primarily because they have to
work nights for the sake of subsistence. This type of insomnia, forsaking sleep to work, has historically taken place for centuries. According to Ekirch, “Among the hardest workers—night in, night out—were women.” For women, continues Ekirch, “Night brought little seeming relief. Often, to paraphrase a contemporary, work was exchanged for work. Domestic tasks invariably extended the days toil” (163). We see examples of women working all day and then into the night in the works of American authors John Steinbeck and Gertrude Stein. While my intent in this argument is not to deny women’s ability to use insomnia as a time and space of agency and reflection, it is important to note a disparity between women’s access to the night world and that of men. Baldwin argues that through much of the nineteenth century, women’s access to public spheres at night was severely restricted. Going out into public at night was both a subject of social disapprobation and practical danger; for the most part, women who ventured out at night had better do so with a male companion, or risked physical and verbal harassment and violation (154). While the twentieth century and its related illumination afforded women more freedom to venture out into the night, efforts were still made to limit women’s access to the public sphere after dark supposedly for their own good (Baldwin 180).

Accordingly, much of the nighttime behaviors we see with women occur mainly within the domestic realm (Richardson’s Miriam is a noteworthy exception, as discussed in Chapter 4). Steinbeck’s novel, *The Grapes of Wrath*, includes a character, Ma Joad, who chooses insomnia for the sake of protecting and preserving her family, indicating her internalization of this role, as well as the limitations it places upon her. Due to the combination of the advent of mechanized farming and
the devastation of farmable lands in the Mid-West that occurred during the Dust Bowl, the Joad family is forced to leave their farm, which no longer supports them, to try and find work in California. To prepare for the trip, the family stays up all night packing their belongings. Ma is the leader of the family: “They waited for her to come back across the darkening yard, for Ma was powerful in the group” (103). She is the one who “started the fire roaring” (104), which allows the family both to eat and to have the light by which they can continue their preparations. At one point, Jim Casy, a former preacher accompanying the family on its journey, comments that Ma “looks tar’d,” to which Tom (Ma’s son) replies, “Women’s always tar’d … That’s just the way women is…” However, Casy notes that she seems “tar’der than that. Real tar’d, like she’s sick tar’d.” Ma overhears Casy’s comment, and “Slowly her face tightened, the lines disappeared from the taut muscular face. Her eyes sharpened and her shoulders straightened” (108). Despite her exhaustion, Ma makes an effort to prevent her family from realizing how tired she is. She knows that she must lead them through the preparations and sacrifices her physical well-being to do so. She chooses insomnia to protect her family. By making her insomnia relative to her position as caretaker, she reveals the limitations of this assumed role, but through her enactment of this role and denial of its damaging effects, she illustrates her own strength and integrity.

Ma’s self-sacrifice continues throughout the trip to California. For example, on the way there, she “had folded her hands in her lap, had retired into a resistance against weariness” (164). Throughout the novel, she watches over her other family members as they sleep, and even sedates the family’s grandfather who refuses to
leave his home in order to bring him along (127), but hardly ever sleeps herself. She says to herself, “I pray God we gonna get some res’. I pray Jesus we gonna lay down in a nice place” (217). For Ma and the rest of the family, California (at least until they actually get there) represents a promised land, a heaven from which they can cease to be like those others forced off their land who “Walk arou’ like they was half asleep” (77) and begin anew. It is a land of redemption, but it is also the place where she hopes to finally find some rest. She knows that until she gets there, she must sacrifice her own sleep in order to maintain her vigil over the rest of her family; until then, her work is incomplete and she cannot sleep. When California turns out to be an utter disaster (no work, no food, no shelter, family in ruins as Tom is forced to escape the police and Rose of Sharon has a miscarriage), Ma’s inability to sleep persists: “Ma turned restlessly in her sleep. Her eyes started wide open” (447). Because her family is not safe, Ma never gets the rest she requires. Her sacrifice is highly spiritualized—she is the family’s protector and guardian. She sees it as her vocation to care for them and keep the family together, and because her family is poor, she takes on the brunt of the responsibility for their care through the sacrifice of her sleep. As long as she is unable to protect her family, though not through lack of trying, she remains unable to sleep. Her insomnia does not indicate that she has sins with which she must reckon, as with Anthony or Virginia, but rather that she has a strong sense of guiding purpose which keeps her awake and ever-vigilant.

Stein provides a similar example in the novella “The Good Anna” from *Three Lives*. Stein’s character Anna, like Ma Joad, works tirelessly to care for those around her, and in doing so, sacrifices her own health and welfare—she sees this role as
caretaker as an intrinsic part of her identity connected to both her social position as a member of the servant class and her femininity. In the beginning of the story, Anna is defined through her exhaustion, as Stein notes that “Anna led an arduous and troubled life” (7). She sacrifices herself to her work because “To her thinking, in her stubborn, faithful, german soul, this was the right way for a girl to do” (23). Her faith in the social role into which she was born motivates her tireless work:

Anna really did believe with all her might. It was her fortune never to live with people who had any faith, but then that never worried Anna. She prayed for them always as she should, and she was very sure that they were good. . . . Anna found it hard to always know why it was that things went wrong. Sometimes her glasses broke and then she knew that she had not done her duty by the church, just in the way that she should do. (46)

The ironic tone of this passage suggests Anna finds a great deal of fault with those around her, but sees their reform as part of her vocation. Ultimately, she does not blame herself when “things went wrong,” but rather the failings of others, which she takes on as her own responsibility. Part of her hard work involves caring for her dogs and the people around her: “Periods of evil thinking came very regularly to Peter and to Rags and to the visitors within their gates. At such times Anna would be very busy and scold hard” (8). Here, Stein emphasizes the religious nature of Anna’s work by associating her business with the prevention of evil and her association of any sort of failure, like her glasses breaking, as a religious failure, though not her own lack of belief. Her role as a woman is also a role as a savior. She is not corrupted by wealth like those she works for, but can rather use her ascetic position as one of reformer.

Stein also emphasizes the exhaustion Anna feels through illustrating Anna’s stubborn refusal to rest: “No argument could bring her to sit an evening in the empty
parlour . . . and tired as she was, she would never sit down during the long talks she held with Miss Mathilda” (17). Anna’s sense of position (she is Miss Mathilda’s servant) and her drive to fulfill her duties, which she largely sees as protecting those around her from either want or evil, result in an exhaustion that ultimately threatens her life. Eventually, Anna is persuaded to rest and she undergoes an operation meant to restore her to health, but only after being assured that her household duties will be covered. However, even the operation and period of rest has little success. Stein writes, “When she was once more at work for her Miss Mary Wadsmith, all the good effect of these several months of rest were soon worked and worried well away. For all the rest of her strong working life Anna was never really well. She had bad headaches all the time and she was always thin and worn” (23). Her concerns for others keep her awake at night as well, as we learn that “She worked and worked all day and thought all night how she could save” (59). Literally, Stein is writing about Anna saving money (so she can give it to others), but her use of the word “save” had a dual meaning—Anna also tries to save people; this is how, despite her relatively inferior social position she can give her life meaning. She does not have wealth or property to sacrifice to others, so she sacrifices her sleep and well being. Her need to save others keeps her awake. By the end of the story, “Anna grew more tired, her headaches came oftener and harder, and she was now almost always feeling very sick. She could not sleep much in the night” (61). Throughout the story, Anna transcends her physical suffering to fulfill the sense of duty as a woman that her faith instills in her and this tendency causes her to lose her health. Anna is very similar to Ma Joad in the way she sacrifices her body to protect those around her, limited to the domestic
realm, and the form which this sacrifice takes is her constant and perpetual restlessness; for both women, religious belief combined with lack of material resources through which they can aid those around them cause their willful insomnia.

Conclusions

Characters of all social positions, races, and genders have trouble sleeping and experience insomnia, but the reasons for this troubled sleep differ from character to character and are largely contingent upon status. Poor characters, like Ma Joad and Anna, sacrifice their bodies through sacrificing their sleep because it is all they truly have to give and their “giving” is limited to the domestic realm because of their gender and class status. Similarly, John Cloud essentially sacrifices his body at the end of Holiday by not resisting the lynching because it too is all he has. On the other hand, characters who are in a position to use their wealth and power to give their lives purpose come, through their insomnia, to the realization of the falsity of material goods to provide and ensure happiness. When Anthony Patch finally gains the financial security he desires, it does not enable him to rest and experience unconsciousness, but rather does the opposite; it places him in a state of permanent insomnia. Because, as Anthony realizes, the wealth is never really what he wanted, he cannot rest easy once he has it, and at the same time, the wealth is his primary obstacle to finding out what it is he really wants. It is a glittering distraction, keeping him awake at night. Mrs. Moore has material wealth, but wants spiritual wealth as well. But, like Anthony, social position (her role in a colonial empire) becomes an obstacle. She cannot have a “pure” experience of India because of the very reasons she has come to India in the first place, to “see” what Britain now owns. Virginia
Hade is in a similar position of complicity with corruption, unable to be free because of the freedoms she participates in denying to others. Virginia falls back on her teachings, becoming the epitome of what she hates, and Mrs. Moore, with her final revelations of futility, dies.

In all of these texts, insomnia is a chronotope of revelation and becoming. In times of insomnia characters realize the falsity of social position and see status as an obstacle to fulfillment, rather than the means to fulfillment they were socialized to believe it is. Insomnia is the physical enactment of anomic tension created by the visibility of realms to which individuals are denied access due to their class, race, gender, and status. Anomie is liminal: one is trapped between desire and attainment of desire. Likewise, the liminality of insomnia, being trapped between sleeping and waking, reflects restlessness and discomfort in a situation where one should be able to rest (the comfort of one’s own bed). Further complicating this dynamic is the valorization of restlessness (though not insomnia) as a marker of productivity and moral goodness within a capitalist paradigm. Yet, as many of the characters I have discussed illustrate, restlessness neither fosters material productivity, nor reveals a state of moral goodness. If anything, it gets in the way of both. Rather, the restlessness associated with insomnia, in these literary texts, exposes the immorality of characters like Virginia and Anthony, and the incomplete morality of others like Mrs. Moore. And, these texts very clearly indicate the interrelationship between morality and social position, specifically through the characters’ behaviors during and reactions to their insomnia. The isolation and thought-time of insomnia forces these characters to face themselves not as social beings, but as individuals forced into an
untenable social position, but also allows them to realize the consequences of their position. Whether that position comes with poverty, as it does for Anna or Ma Joad, or through an abundance of material comforts, as with Virginia Hade and Anthony Patch, insomnia foreshadows the ultimate collapse of who these characters thought they could and should be. It does bring about reflection and revelation, but when that revelation is obfuscated by social circumstance, the hopes brought about by such revelation atrophy. Having insomnia without being able to learn from the insomnia renders insomnia symbolically meaningful yet futile with regard to action and behavior. All of these characters are doomed by their own exhaustion, which is merely a consequence of the roles they have been expected to fill.
CHAPTER 6

A VISION OR A WAKING DREAM: INSOMNIAC LITERATURE

John Keats closes the final stanza of his poem “Ode to a Nightingale” with two questions: “Was it a vision, or a waking dream? / Fled is that music:—do I wake or sleep?” (8.9-10). His uncertainty about his state of consciousness is significant. This poem, about the liminal space between life and death, which he relates to the space between sleeping and waking, asserts that it is from this liminal space that poetry itself is produced. For Keats, a Romantic poet, this space allows for reverie, and reverie for contemplation and art. Arguably, this drowsy state of reverie for the Romantics became insomnia for the Modernists. Where Keats finds himself being lulled to sleep, unsure of whether or not he has yet to reach unconsciousness, his modernist counterparts find themselves vigilantly awake, wondering if they will reach sleep at all. Yet, the liminality and significance of this space remain. The question, “Do I wake or sleep?” remains an important one because the answer itself, as Keats suggests through even asking this question, resists such binary classification.

Writing about authorship and the space between consciousness and unconsciousness, Maurice Blanchot argues:

[I]t is thus toward another sort of language entirely—the language of writing, the language of the other that, outside of everything, outside of consciousness and unconsciousness, in the element that vacillates between waking and reawakening, we know ourselves (not knowing this) to be always already deported.

Of course, the separation, which seems to affect the one and the other and divide them infinitely, can in its turn give place to a dialectical process. (Disaster 79-80)

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This dialectical process, the vacillation between the sleeping and waking self and the way each changes and shapes the other, for Blanchot, is also that which allows for the language of writing. According to Peter Schwenger, “Any page of a novel is a threshold zone, whose words simultaneously partake of the waking and the dreaming worlds” (21). He continues, “writing always takes place in a liminal zone, neither wholly on the page, nor wholly in the mind” (23). Insomnia, which Schwenger characterizes as “almost always more liminal than simple wide-awakeness” (ix) and which for many, as I discussed in the second chapter may very well be a series of vacillations between sleeping and waking, is a time and space encompassing this dialectical process discussed by Blanchot from which writing emerges, especially in the Modernist period, during which insomnia was so culturally and historically significant.

Mikhail Bahktin provides useful language through which to discuss both the phenomenology and ontology of insomnia as it relates to authorship. Bahktin uses the term *chronotope* to define the interrelationship of time and space: “We will give the name *chronotope* (literally, ‘time-space’) to the intrinsic connectedness of temporal and spatial relationships that are artistically expressed in literature” (84). While in this definition of the chronotope, Bahktin is referring to a specific element in the text itself (the insomniac’s experience of time when in bed awaiting sleep is an example), the association between time and space also has significant implications for the authorship of the text itself. Bahktin argues:

*We might put it as follows: before us are two events—the event that is narrated in the work and the event of narration itself (we ourselves participate in the latter, as listeners or readers); these events take place*
in different times (which are marked by different durations as well) and in different places, but at the same time these two events are indissolubly united in a single but complex event that we might call the work in the totality of its events, including the external material givenness of the work, and its text, and the world represented in the text. (255)

Thus, for Bakhtin, an inextricable relationship exists among the time and space contained within the text, the time and space of authorship, and the time and space of readership. This relationship among these disparate chronotopes as they are related to the phenomenological and ontological experience of insomnia, for characters, authors, and readers, are the subject of my inquiries in this chapter.

If one were to compile a list of modernist authors, and choose from this list at random, chances are quite good that the authors selected would be insomniacs. Among the insomniac Modernists, we can find names such as Marcel Proust, Franz Kafka, F. Scott Fitzgerald, Ernest Hemingway, D. H. Lawrence, Virginia Woolf, and Vladimir Nabokov, to name just a few of numerous examples. Modernists are not the only authors to suffer insomnia, and other notable insomniacs from literary history range from Homer and William Shakespeare to Gustave Flaubert, Fyodor Dostoevsky, and Charles Dickens (Schwenger 149). In short, a connection appears to exist between insomnia and authorship, and it is the nature of this connection I seek to explore in this chapter, specifically as it relates to modernist literature.

In his 1865 text, entitled On Wakefulness, physician John Hammond proposes a possible explanation as to why authors are more prone to insomnia than others through making the connection among cultural refinement, propensity towards excessive thought, and insomnia: “As nations advance in civilization and refinement, affections of the nervous system become more frequent, because progress in these
directions is necessarily accompanied by an increase in the wear and tear of those organs through which perceptions are received and emotions excited” (39).

Hammond argues that despite increasing levels of material comfort and hygiene made possible by modernization, instances of insomnia become more, not less, prevalent specifically because of an increased stimulation of perceptive and emotional faculties. In other words, the less one has to guard against environmental dangers, the more one can devote time to thought, yet thought sometimes begets over-thought, which begets insomnia. As Hammond asserts, “irregular or excessive cerebral action” leads to a heightened propensity towards sleeplessness (40). For Hammond, a combination of intelligence and sensitivity to perceptions of the world produce insomnia. Accordingly, he believes that “the more active the mind the greater the necessity for sleep, just as with a steamer, the greater the number of revolutions its engine makes the more imperative is the demand for fuel” (12). Using mechanistic language, Hammond not only equates mental stimulation with insomnia, but asserts that those who are the most mentally stimulated, and therefore sleep less, should actually be sleeping more because their mental faculties are more in need of restoration.

Hammond’s arguments derive from his theory that all bodily organs and tissues are in a constant state of decomposition when in use, only to be remedied through periods of rest and inactivity (11). In the case of the brain, “Its substance is consumed by every thought, every action of the will, by every sound that is heard, by every object that is seen, by every substance that is touched, by every odor that is smelled, by every painful or pleasurable sensation, and so each instant of our lives witnesses the decay of some portion of its mass and the formation of new material to
take its place” (12). This “formation of new material” can only take place during the comparative rest of sleep, which allows restoration of the mental faculties because not all parts of the brain are at work. Interestingly, from Hammond’s perspective, sleep and intellect are in a paradoxical relationship: while heightened intellect leads to propensity to poor sleep, poor sleep leads to a reduction of intellect. He cautions, “Upon the intellectual powers the mischief [of insomnia] is still more serious. . . . [M]any a noble spirit has been utterly prostrated by habitual loss of rest” (43). Citing multiple case studies of literary authors as patients whose work suffers from their inability to sleep, the treatment he consistently finds to be most effective for restoring “normal” sleep patterns is a hiatus from intellectual activity (43-44; 62-68).

Hammond is not alone in his association between insomnia and those who perform mental labor. While A. W. MacFarlane, writing about a quarter of a century later, disagrees with Hammond that those who do active brain work require more sleep, he agrees with the correlation between high brain function and the tendency towards sleeplessness:

The more highly-cultured races sleep for a shorter time than those in the lower grades of civilization. Active brain-workers require, and probably get, a smaller amount of sleep than those who are engaged in manual labor, and still less than those who spend their days in frivolity and idleness. They live their lives more fully. Some of the most acute and brilliant thinkers and writers of the present day sleep comparatively little, from the power, probably, that they posses of concentrating their sleep (illustrating the quality of sleep). Brain-workers are peculiarly liable to sleeplessness. The cerebral cells, being in constant use, are apt to remain active after work has been abandoned, and while this is the case, sleep is prevented. (45)

Despite the obvious racially and economically motivated (not to mention racist and classist) ethnocentrism of MacFarlane’s claim (as well as Hammond’s to a lesser
degree), he makes two important points, which seem to be in conflict with each other, and are both in contradiction with Hammond’s assertions of the correlation between intellect and sleep requirements. MacFarlane argues that those of heightened intellect “probably” know how to sleep more efficiently than others, and, therefore, require less sleep, not more, as Hammond suggests. Examples such as Thomas Edison, famous for allegedly subsisting on naps in his workshop, and Napoleon, notable for sleeping little, but at will, come to mind (MacFarlane 44). Yet, sometimes “brain-workers” remain unable to turn off their brains, and thus, have difficulty falling asleep, which suggests not efficient consolidation of sleep, but time relegated for sleeping spent unwillingly awake, sometimes rather painfully as the personal, non-fiction writings of some authors suggest. Either way, MacFarlane concludes brain workers not only get less sleep, they need less sleep. Unlike Hammond, MacFarlane does not see reduced sleep as hampering to a powerful intellect.

Literary authors appear to have similarly divergent views on the purpose and necessity of sleep, as expressed in their journals and other autobiographic writings. Vladimir Nabokov, for example, expresses resentment towards the need for sleep, seeing it as wasted, unproductive time. He values his insomnia as a necessary component to his literary productivity because of the time it affords him to work. Nabokov, true to form, holds nothing back in his own devaluation of sleep. In his autobiographical work, Speak, Memory, Nabokov discusses his sleep habits and views on the practice of sleep:

All my life I have been a poor go-to-sleeper. People in trains, who lay their newspaper aside, fold their silly arms, and immediately, with an offensive familiarity of demeanor, start snoring, amaze me as much as the uninhibited chap who cozily defecates in the presence of a chatty
tuber, or participates in huge demonstrations, or joins some union in order to dissolve it. Sleep is the most moronic fraternity in the world, with the heaviest dues and the crudest rituals. It is a mental torture I find debasing. The strain and drain of composition often force me, alas, to swallow a strong pill that gives me an hour or two of frightful nightmares or even to accept the comic relief of a midday snooze, the way a senile rake might totter to the nearest euthanasium; but I simply cannot get used to the nightly betrayal of reason, humanity, and genius. No matter how great my weariness, the wrench of parting with consciousness is unspeakably repulsive to me. (108-09)

His case is particularly interesting in response to MacFarlane’s remarks on the ability of the actively-minded to consolidate sleep because of his expression of his ability to avoid sleeping whenever possible. Nabokov, not one to soften his statements for the sake of amicability, has some sardonic words for sleep and its constituents, depicting sleep as a conformist ritual of the avoidance of consciousness and agency. While many texts, both literary and medical, present sleep in pleasant light, as a respite from the worries and cares of the day, Nabokov argues that sleep is quite the opposite. It is not only a window to viewing possible drug-induced horrors, but also a form of “torture.” Nabokov is not the first to equate sleep with a temporary loss of the self, which he views as a “betrayal of reason, humanity, and genius,” but he is relatively unique in the virulence of his repulsion to this mental hiatus. By bringing in terms like “euthanasium,” he equates the blind following of sleep-related rituals and deference to sleep with blind participation in the fascist and dictatorial regimes he left Europe to escape. For Nabokov, giving oneself willingly over to sleep is as absurd as giving oneself willingly over to violent oppressors. Being a staunch anti-Freudian (he “[rejects] completely the vulgar, shabby, fundamentally medieval world of Freud, with its crankish quest for sexual symbols . . . and its bitter little embryos spying, from their natural nooks, upon the love life of their parents” (Speak 20)), it stands to
reason that Nabokov sees little value in the analysis of his unconscious thoughts or images from his dreams. Strikingly, Nabokov also rejects the equalizing factor of sleep, both for its biological commonality (“moronic fraternity”) and its elements of socialization (“crudest rituals”). He does not share the insomniac’s hope of being able to sleep “normally” like everyone else, but instead resents that he needs to sleep like everyone else does. He may not have the power of efficiently “concentrating [his] sleep,” to which MacFarlane alludes (though he appears to wish for it), but certainly possesses the “liability to sleeplessness” MacFarlane describes.

Though many writers have confessed to similarly troubled sleep, not all writers share Nabokov’s outright disdain for it. Many writers view sleep as necessary, presenting a view more akin to that of Hammond, who argues that more mental labor requires a greater amount of sleep. Kafka, for instance, wrote specifically to “shut [his] eyes,” according to statements made in his journal (qtd. in Flaherty 215), indicating his pressing desire to sleep despite it not coming easily to him. Sleep appears to be something Kafka actively sought, and his writing was the means through which he could release his thoughts enough to find rest. Much as the writing instructor will often encourage his or her students to “write to discover what you think,” Kafka needed writing to process thought, the expression of which allowed a temporary escape.

F. Scott Fitzgerald, like Kafka and Nabokov a notorious insomniac, describes sleep in much more seemingly pleasant terms than Nabokov does, writing in an essay about sleep, “Sleep—real sleep, the dear, cherished one, the lullaby. So deep and warm the bed and the pillow enfolding me, letting me sink into peace, nothingness”
(“Sleeping” 67). Fitzgerald emphasizes the idea of sleep as an escape from the world, one which he desires. But, his language also indicates an infantilizing of the sleeper by referring to sleep as a “lullaby.” The bed becomes like the womb, welcoming him back to its enclosure, to a state of stasis and inertia, such as the one Sigmund Freud describes in “Beyond the Pleasure Principle.” For Freud, humans vacillate between life-affirming drives and life-denying drives. Freud argues that “the goal of all life is death” and as such, life “must aspire to an old state, a primordial state from which it once departed” (Beyond 78). Fitzgerald’s description of the comfort, security, and encompassing enclosure of his bed evokes a sense of his desire to return to this “primordial state” of “nothingness.” Sleep is an escape for Fitzgerald, an escape from life into temporary death, so it would seem.

Regardless of the disparate presentations of sleep from the literary community, some consistency does exist within the medical community. From the nineteenth century until today, a majority of medical practitioners in the sleep field agree that sleep is a biological necessity though they may disagree on how much sleep is needed for any given individual (a debate that continues today). Literary authors, on the other hand, are divided: some see writing as a means towards the pleasant relief of sleep, while others see sleep as an obstacle to completing their writing. While both groups acknowledge the need for sleep, they place different values on it. The former relates sleep to biological necessity, the other to authorship.

However, my purpose in this chapter is not to debate the value of sleep, nor is it to discuss the ways in which authors valorize or demonize sleep in their works. Rather, my goal here is to fill a crucial gap in the connection between insomnia and
authorship with which I began this chapter. While MacFarlane and Hammond overtly connect an over-active or highly intellectual mind to an increased propensity towards insomnia, I choose to examine a variation on this theme: how does the inability to sleep shape the productions of an over-active mind? More specifically, what contributions does insomnia make to creativity and authorship? My objective in this chapter is not to draw connections between the insomnia of authors and the insomnia of characters to make biographical assumptions, but instead to illustrate the ways in which the chronotope of insomnia structures the modernist text, both in content and form. In other words, in this section, my desire is not to show why or how a given character (or an author for that matter) experiences insomnia, as I have in previous chapters; my purpose is to illustrate how the insomnia of the author relates to the structure of the text and the experience of the reader. How is the time and space of the author’s insomnia reflected in the time and space of the text? MacFarlane and Hammond argue that mental activity generates insomnia; whereas, I posit that insomnia generates the unique type of mental activity necessary and intrinsic to the creation of texts, especially the modernist text. It does so not merely in terms of giving one time and isolation with which to work, but also in shaping one’s perspective in a manner that influences one’s interpretation of the world. This insomniac interpretation of the material world of the author is then transferred onto the author’s generation of the world of the text. The texts I will discuss in this chapter are not simply a consequence of the author’s insomnia, nor are they a cause of it or cure for it. Instead, they are structurally determined, at least in part, by the phenomenology of the author’s insomnia. Features of the experience of insomnia and
perceptual changes it allows are then represented within the text, both through the actions and thoughts of characters and the relationship between time and space within the text itself. Insomnia is not only a result of the creative process, but also necessary to it both temporally and spatially, and the way in which both time and space are experienced differently in the state of insomnia become apparent through the ways in which modernist texts are often structured.

To this end, I plan to explore two different directions with regard to the function of insomnia as it relates to the modernist text. One direction of inquiry deals with the way in which the experience of insomnia shapes the text itself in terms of its relationship to narrative time and space. Much of the reasoning behind this argument stems from my position that there is a great deal of affinity between one’s state of mind during a period of insomnia and one’s state of mind during the act of writing. Both states share a liminality of subjectivity, an act of partial, yet incomplete loss of the self. Herschel Farbman, for instance, argues that “there is no subject present in sound sleep to whom anything might seem” (35). Just as an author transitions from the role of subject (human, citizen, gendered body, member of a given race and class), to the role of creator of subjectivity within his or her texts, yet remains trapped between both states in the act of writing, the insomniac is placed in a similar position of consciousness of the self in an attempted transition to the loss of the self sleep entails, from being a subject in the material world to being an author of dreams in the unconscious world. This liminal space of writing is similar to the liminal space between sleeping and waking because of its transitory nature and the space of movement from the mind to the page and beyond. In terms of temporality, Farbman
argues that “Writing must go on in order to finish and finish in order to go on” (70).

The same can be said of insomnia, which both traps the subject between states of awareness of subjectivity and loss of subjectivity, but also entails a constant movement towards an end (sleep), as it requires that end occurs for it to exist at all because without the need for sleep, insomnia is not possible.

The relationship between insomnia and authorship extends beyond simply the liminality of the time and space of writing, especially in the case of the modernist text. The phenomenological experience of insomnia shares numerous structural features with modernist literary works. Michael Greaney explains, “Modernist literature—stream-of-consciousness narrative, interior monologue, the absent-minded trance of involuntary memory—can be read as dispatches from the hinterlands of sleep, the effusions of a hyperactive mind a substantially deactivated body” (5). As Greaney notes, some of the symptoms, or “structural features” of insomnia are expressed in modernist literature as textual devices. Both insomnia and the modernist text have elements similar to what one experiences during insomnia including an intense focus on individual psychology, a heightened awareness of the passage of time yet simultaneous sense of frozen time, a basis in the routine and everyday experience, and a continuous vacillation between immersion in a stream of thought and return to self-consciousness. This consciousness of oneself during insomnia manifests as the inability of the insomniac to find true immersion in the stream of thoughts leading towards sleep, as these thoughts are constantly disrupted by either the self or outside stimuli. As Schwenger argues, “Sleep comes by means of the flow of one’s thoughts, a flow that becomes a drift” (3). But, for insomnia, this “drift” is
constantly interrupted by a return to the realization of the state of insomnia (checking the clock, shifting positions in bed, getting up and walking around). Similarly, the modernist text frequently breaks the reader from full immersion in the characters’ thoughts and experiences through its self-referentiality and tendency to draw attention to its own structure and fictionality. While I completely agree with the correlations Greaney lists between the various devices of modernist novels to the experience of insomnia, I would posit an additional layer of correlation, and this layer is the holistic experience of the text as also insomniac in nature, obeying larger patterns of cyclical time and memory, as well as disruption of and immersion into streams of consciousness.

This holistic experience of the text relates both to the relationship between insomnia and the author, as well as insomnia and the reader. If, as I argue, the author’s experience of insomnia structures the production of the literary text and its use of various devices, perspectives, and temporality/spatiality, and the author transfers this structure to the mind of the reader through the process of reading, then the insomnia of the text is not exclusive to the author; it becomes the reader’s insomniac perception and experience as well. Another element of my argument is to describe the ways in which reading the modernist text transfers the experience of insomnia to the reader. Not only does the act of reading put one into a liminal state of mind, akin to the insomnia of authorship, but it also can engender the actual experience of a state similar to insomnia, for example, racing thoughts, an altered sense of the passage of time, and even anxiety or frustration. For example, Bryony Randall argues:
Remaining aware of clock time, of the time taken up in the practice of reading, the reader’s attention will be only partially engaged with the text, and will still be fully aware of external objects and pressures. At the other end of the spectrum, losing the sense of clock time, being immersed in the time the text describes, will be a kind of all-embracing attentiveness, perhaps even involving a loss of sense of self. (166)

Bryony Randall situates the reader, at least one who is fully immersed in the act of reading, in a position almost similar to that of the author, in a liminal state of mind between the text and the self. This reader can easily lose a sense of time, but can similarly be returned to awareness of time’s passage, depending on the amount of immersion into the text the reader experiences. Schwenger discusses a passage in which Marcel of *Swann’s Way* by Marcel Proust drifts off to sleep while reading and has a dream-like experience of himself within the text (38). Regarding Marcel’s experience and the experience of the reader more generally, he refers to “the fusion of the dreaming and waking states at the page’s surface” (40). For Schwenger, reading is “the place where consciousness is taken over by something else that thinks otherwise than do our daylight minds” (40), similar to the “nocturnal thoughts” of the insomniac described by Elizabeth Bronfen. Bronfen argues, “[Insomniacs] open out to an encounter with what Hegel calls the night of the world in which the self reaches the navel of all coherent self-conceptions, where it has insight into its own unfathomability” (159) because insomniacs are “compelled to endure a state of body and mind that severs them from the consciousness of the day” causing them to emerge as “a radically subjective spirit” (160). Just as the reader experiences a state of consciousness differentiated from ordinary daytime consciousness through immersion into reading, thus becoming a subject of the text he or she is reading, the
insomniac also experiences an otherness of thought, becoming subject of his or her insomnia. Our experience of the world mediates our experience and awareness of our consciousness and perceptions, but, as I argue, there is a correlation between this mediation as it relates to insomniac-consciousness and readership as both are related to the slippage of subjectivity, the former towards sleep and the latter towards immersion in the text.

To make my argument, I will examine three texts in which not only do characters experience insomnia, but are themselves insomniac in their structure and have the capacity to transfer this sense of insomnia to readers. These texts are James Joyce’s *Ulysses*, Nabokov’s *Lolita*, and Richard Wright’s *Black Boy*. *Ulysses*, I will argue, is an insomniac text both for its temporalization of day only in relation to night, as well as through the constant alterations of stream of consciousness passages with metafictional devices used to jar the reader out of full immersion not in the text, but in its narration, drawing attention to the “otherness” of textual thought. *Lolita* illustrates the power of insomnia as a creative force, as narrator and protagonist Humbert Humbert uses his insomnia to create both his narrative and the character of Lolita. As in Joyce’s novel, the daytime passages are all placed in relation to Humbert’s night-thoughts, and the night-thoughts are those which move the novel both forwards and backwards in time and action. Wright’s *Black Boy* is different from both *Ulysses* and *Lolita* in that it is not a fictional, but rather an autobiographical text. However, Wright’s experiences recounted through this text use the otherness of night thought to reveal the tensions of the characters’ daytime lives, and the text is also structured as an unending and unfulfilled, yet ultimately hopeful, quest for restful
and secure peace. Through these texts, I will argue that significant parallels exist both among insomnia and the production of texts, as well as the conventions of the modernist text, and between insomnia and the experience of the reader of these texts.

**Insomnia as Narrative**

Literary texts are particularly useful in the understanding of insomnia both because of their ability to illustrate the phenomenology of the insomniac experience, as well as the similarities between the work one may do in fields such as medicine or psychology in studying the individual character and the work an author does in creating his or her characters. Evidence of this connection comes through the widespread use of both the material and methodology of literature in medical and psychological studies of sleep and insomnia. Hammond, for example, quotes *Don Quixote*’s Sancho Panza to express to his readers the nature of the experience of sleep (*Wakefulness* 43). Though there is often a tendency to separate conclusions and observations drawn within art and science and view them as oppositional in both purpose and methodology, many in the medical discipline look to literary texts as case studies (Sigmund Freud is one notable example), as well as construct medical texts using literary forms, such as the narrative. Additionally, many literary authors are involved in medical practice. Notable examples include Sir Arthur Conan Doyle and Anton Chekov, both of whom were also physicians.

In an address entitled “Shakespeare as a Guide in the Art and Practice of Medicine” by British physician Sir St-Clair Thomson, M.D., given in 1919, St-Clair argues that Shakespeare is “one author which every medical man should study deeply” (901). He looks to Shakespeare for information on various aspects of the
medical field, including a history of medicine and regard for the medical profession (902), but also for insight into medical conditions, such as digestive disorders and fainting (905). Of course, one of the issues on which St-Clair seeks Shakespeare’s knowledge and experience is that of sleep. He writes, “There is one function of the *mens sana in corpora sano* which I never appreciated to its full value until taught by Shakespeare, and that is the importance of sound, sufficient and regular sleep” (908). He continues, “Indeed, it has been suggested that the poet himself must have suffered from sleeplessness, so vividly does he describe the horror of insomnia, so wisely does he regard the invoking of sleep, and so warmly does he praise the value of being able to steep our senses in forgetfulness” (908). To illustrate his point, St-Clair cites four of Shakespeare’s plays: *Macbeth*, *Measure for Measure*, *Cymbeline*, and *Henry IV, Part II*. From his study of Shakespeare’s work, he concludes that sleep is an under-appreciated and natural “course in the cure of disease” and “that the sweat of industry is the best soporific” (909). Through Shakespeare’s work, St-Clair draws practical conclusions applicable to his patients, but also emphasizes the importance of using literary works as valued educational texts providing descriptions of symptoms and cures. The literary plays an important role in the creation of medical texts about insomnia for a number of reasons. Such texts can effectively teach us about the phenomenology of insomnia and the insight of authors into human experience should not be overlooked, but more importantly the emphasize the interrelationship between the medical and the literary. Both involve the use of narratives to explore the phenomenological. Just as an author might describe an insomniac experience within his or her literary work, a physician does the same in his or her case studies, as well
as relies on the patient’s own narrative of his or her symptoms in the process of diagnosis and treatment. Insomnia is a unique condition in that physician cannot diagnose or treat it without the patient’s narrative. As Kenton Kroker notes, “the physician [facilitates] treatment of what the patient already [knows] to be the problem” (350).

In short, insomnia is a condition that both facilitates the production of narratives, as the insomnia narrates his or her insomniac thoughts and perceptions, and requires narratives for medical diagnosis and treatment, inasmuch as one must describe the insomnia and its surrounding circumstances to the doctor and the doctor attempts to generalize about the condition as it applies to both the sufferer and others based on the patient’s narrative. One of the first insights with regard to insomnia and the creation of texts comes with the relationship between the environmental conditions related to insomnia and the function of these conditions for the author. To return to the passage from Nabokov’s autobiography cited earlier, it is clear, given his hatred of having to sleep at all, that Nabokov sees productive value in his insomnia, and often spent “a sleepless night of verse-making” (Speak 268). Dreaded by him as a child (Speak 266), his insomnia later became useful to his career, so that his friends began “commending [his] nocturnal labors” (Speak 267). Part of the reason Nabokov and writers like Fitzgerald and Kafka were able to use their insomnia productively comes with the physical conditions insomnia affords, a combination of idleness and isolation. For Nabokov, this time was used actively writing, at least sometimes.

For Fitzgerald, it was used for contemplation. During bouts of insomnia, which he refers to as “a period of silence,” Fitzgerald “was forced into a measure that
no one ever adopts voluntarily: I was impelled to think. God, it was difficult! The moving about of great secret trunks” (“Crack-Up” 78). The “silence” for Fitzgerald gives spatial element to his thoughts, which he can envision as concrete objects within his mind. His imagery here is paradoxical, as it both renders thought as something predating his awareness of it, a thing in his mind that only awaits his “discovery” in a sense, a discovery that insomnia makes possible. Yet, at the same time, his ability to discover these thoughts is limited, as they are locked up in “secret trunks,” that though moveable, still remain closed. Fitzgerald continues, commenting that he “had done very little thinking” and that, the more he thinks, the more he realizes that “there was not an ‘I’ anymore—not a basis on which I could organize my self respect. . . . It was strange to have no self” (“Crack-Up” 79). By maintaining the secrecy of these “trunks” of thought, which seem to exist simultaneously within and independent of his own mind, Fitzgerald effectively upends Descartes’ cogito: arguing instead, “I think; therefore, I am not.” Insomnia is the point at which he is both able to “lose” his subjectivity, but remain conscious of this loss. This experience of loss of the self in the transference (“moving about”) of one’s thoughts reflects the liminality of authorship, in which the author transfers thought to the page so that these thoughts can exist external to, yet intrinsically connected with, the author’s self.

Insomnia creates an ideal circumstance for thought because it is often experienced in a state of isolation united with idleness, as one lies in bed awaiting sleep, which Bronfen suggests “offers a psychic state and stage for an encounter with one’s most intimate desires and anxieties” (160), or rather forces an individual to confront the existence of thought itself and the relationship between thought and
awareness of existence. Virginia Woolf also discusses the way in which one’s perspective changes both as a result of illness and time spent in bed:

[Illness] invests certain faces with divinity, sets us to wait, hour after hour, with pricked ears for the creaking of a stair, and wreathes the face of the absent (plain enough in health, Heaven knows) with a new significance, while the mind concocts a thousand legends and romances about them for which it has neither time nor taste in health. (“Ill” 6)

For Woolf, illness changes our relationship to ourselves, and therefore others, represented in this passage metonymically as “faces.” Significantly, it gives the ill person the ability to authorize these “faces,” endowing them from his or her unique perspective with a different significance, generated by the ill individual rather than the person the face signifies. Through illness, we do not just contemplate others, but actually create them in an image we determine, an act of authorship. While insomnia and illness are far from synonymous, some of the significant features of illness to which Woolf points (isolation, time spent in physical inactivity, prolonged periods of waiting) are characteristics of insomnia as well. Woolf further notes the way the world changes from the view of the supine, arguing that “the sky is discovered to be something so different from this [everyday view] that it really is a little shocking” (“Ill” 13). The combination of these two conditions of isolation and idleness facilitates and encourages thought, but more importantly the transference of thought, even if that thought is not necessarily desirable but inevitable, as Fitzgerald, Bronfen, and Woolf observe.

Of these combined conditions of idleness and isolation and their resulting influence on perception, Walter Benjamin writes:
Among the conditions of idleness, particular importance attaches to solitude. It is solitude, in fact, that first emancipates—virtually—individual experience from every event, however trivial or impoverished: it offers to the individual experience, on the high road of empathy, any passerby whatsoever as its substitute. Empathy is only possible to the solitary; solitude, therefore, is a precondition of authentic idleness. (805)

Solitude allows the solitary individual to differentiate between perception and “objective” experience. In doing so, the individual can cease to view experience through only one lens, but rather creates a multiplicity of possibilities of reflection from various subjective viewpoints. In other words, being able to reflect on experience from without, not as participant, but as observer, is necessary in the production of empathy, the ability to imagine experience from a different perspective. To do so, one must be able to separate the experience from one’s subjective experience of the experience. To this end, Jonathan Crary makes an interesting point, citing the work of Hannah Arendt, specifically her text The Human Condition. Crary writes, “For an individual to have political effectiveness, there needed to be a balance, a moving back and forth between the bright, even harsh exposure of public activity, and the protected, shielded sphere of domestic and private life” (21). Crary’s concern is that with the constant influx of information and perpetual infiltration of the public into the domestic sphere via technologies such as social networking and mobile phones, which for many occupy a space on the bedside table when one is sleeping, this private space for reflection is increasingly threatened. One is too busy experiencing to ever remove oneself from that subjective position of experience. Arendt’s concern may be with “political effectiveness,” but the same logic can apply to writing and artistic creation. To write, one needs a separation between public and
private, and insomnia, when one is isolated from the world, provides this isolation (which would more have been the case in the Modernist period, where computers, cell phones, and social networks did not offer twenty-four hour access to the public and even fellow insomniacs). As Bryony Randall argues, “Creativity … is itself evidence of duration” (55). Aside from images or ideas with which to work, authors need time, time often provided by insomnia. Since literary works require reflection on the part of the author (they do not merely transcribe events, but comment on them as well), solitude and literary creation are most certainly closely related.

Benjamin’s argument is particularly interesting with regard to the creation of the literary text and the author’s ability to both empathize with his or her characters to create them and transfer this sense of empathy to readers through their own movement of thought inasmuch as this movement is controlled by the text. He argues that solitude is a necessary condition for empathy, and insomnia, whether in the form of Nabokov’s active writing or Fitzgerald’s inevitable thinking, surely allows for such solitude. Because of the change in perception solitude allows, the novelist is capable of replacing the thoughts and mindset of the readers with those of the characters, through a transmutation of emotion to imagery, but of course, to do so, one must first understand emotion, made possible through empathy, a consequence of solitary reflection. Further, the novelist can then enable his or her readers to empathize as well. While insomnia is not necessarily intrinsic to this process for every novelist, for some, it certainly plays an important role. The novelist can create a text in which the reader feels as though he or she has become a part of the world of other people, thus, separating lived experience from individual perception of experience.
Benjamin continues, “idleness, in the bourgeois society that knows no leisure, is a precondition of artistic production. And, often, idleness is the very thing which stamps that production with the traits that make its relation to the economic production process so drastic” (805-06). Though Benjamin is not very specific in this passage as to the “relation to economic production” of the production of art, one can conclude that he views the two as in a state of tension. Conditions of economic production often require a very black and white relationship between activity and inactivity. Activity means the production of material or otherwise tangible goods and services (including tasks such as caring for children), and inactivity is a state necessary to prepare oneself for such production, echoing the mechanistic model of the body and its accumulation and replenishment of resources posited by Hammond. However, in terms of economic production, no room for idleness exists outside of its function as a time for necessary rest. As E. P. Thompson argues with regard to capitalist ideology, “the labourer must not loiter idly” (83). He or she is rewarded “for the productive consumption of time,” which includes time spent sleeping (91). The laborer’s rewards, according to Thompson, “are wage incentives and expanding consumer drives” or in other words, “palpable” (91). Even our use of the phrase “time spent sleeping” (or doing anything else for that matter) implies time as a commodity or a form of currency to be exchanged for a commodity. However, for the artist, author or otherwise, reward comes not through labor, but specifically through a uniquely productive form of idleness often provided through insomnia. A writer’s rewards may be “palpable,” in terms of earning royalties from a financially successful book or receiving critical praise, but often they are not. Rewards come in
the form of the ability to cultivate and express insight if only to oneself—a reward that cannot be measured or understood in material terms.

Thus far, a clear correlation exists between the insomnia of authors, the solitude and idleness it engenders, and the realizations of empathy and insight available only through such solitary and idle thoughts. It places the author in a liminal state, not dissimilar to the process of writing itself (Schwenger xii). As Schwenger observes, the processes of reading and writing are similar in their liminality: “While literature is here the means of understanding liminal states, the reverse is also true: liminal states throughout are used to speak of the ways in which literature is itself is a liminal state, for the writer and the reader” (xii). Therefore, not only does insomnia provide the conditions by which the empathy and insight necessary to literary creation are cultivated, but the liminality of insomnia also mimics the processes of both writing and reading. Much as an insomniac often loses control of his or her thoughts, as they drift from present, past, and future, the reader’s internal voice is replaced by that of the text. Additionally, for the reader there is dissociation between material conditions (the physical reading environment) and the mental production of the world of the text.

Bronfen writes that insomnia and its related “nocturnal thinking,” “seeks to explore a scene of philosophy in which our eyes are open, our hearing alert, our spirit attentive, our words ready for a mobilization that is as yet uncertain, even while drawing its strength from the certainty that the morning is still a long way off” (161). The author is one who can “mobilize” the uncertain words and put forth the “scene of philosophy” experienced through his or her “nocturnal thinking.” Bronfen argues that
night is “a privileged site for an existential openness to the other, to being outside and beyond material existence, which is also the domain of modern textuality” (22).

Again, Woolf expresses a similar insight with regard to illness, emphasizing its ability to change our perceptions by leaving us alone with them (“Ill” 23). The author is able through both authorship and insomnia to be open to the other through both the experience of and creation of the other. Because a text creates its own reality, the text exists outside of the objective material world of day-to-day life; insomnia creates a passageway to this world.

Literature, then, is in a unique position not only to confer empathy towards characters on the reader through eliciting the character’s thoughts in the reader’s mind, but also the mental state of the author himself or herself, mitigated further through the narrator, as the author’s words in the narrator’s voice replace the reader’s internal monologue and the text’s scenes replace the reader’s environment. Further, literature can also give expression to the author’s physical, as well as mental state. Woolf, in her essay “On Being Ill” writes of her astonishment that most authors do not choose to write about experiences of illness, which she finds surprising given the power of the body to influence one’s perceptions of the world:

All day, all night the body intervenes; blunts or sharpens, colours or discolours, turns to wax in the warmth of June, hardens to tallow in the murk of February. The creature within can only gaze through the pane--smudged or rosy; it cannot separate off from the body like a sheath of a knife of the pod of a pea for a single instant; it must go through the whole unending procession of changes, heat and cold, comfort and discomfort, hunger and satisfaction, health and illness, until there comes the inevitable catastrophe; the body smashes itself to smithereens, and the soul (it is said) escapes. But of all this daily drama of the body there is no record. People write always of the doings of the mind; the thoughts that come to it; its noble plans; how the mind has civilised the universe. They show it ignoring the body in
the philosopher’s turret; or kicking the body, like an old leather football, across leagues of snow and desert in pursuit of conquest or discovery. Those great wars which the body wages with the mind a slave to it, in the solitude of the bedroom against the assault of fever or the oncome of melancholia, are neglected. (4-5)

In this passage, Woolf notes the power the body has over the mind of the writer, especially when it “enslaves” the mind, or in other words, the body and mind are in conflict, as in the case of insomnia. The body does not necessarily compose the perceptions of the individual on its own, yet the ill body produces a distinctive lens through which experience is mediated and, therefore, perception is filtered. Often, argues Woolf, we can pretend the body does not exist as it is related to thought—thoughts exist independently of the body, in a different realm. But, illness forces us to realize this correlation, as we can no longer separate physical condition from mental condition. It is not so much that this relationship does not exist in “normal” healthy daily experience, but that a body that does not draw attention to itself through pain renders itself ignorable. Woolf also points particularly to this battle between mental and bodily awareness happening in the bedroom, which is suggestive of the sleep space as battle ground, and later refers to sleeplessness as a potential literary “villain” (6). Insomnia, as a condition of or akin to illness, draws the insomniac’s attention to the easily underestimated relationship between bodily sensation and perception. Most importantly, Woolf’s acknowledgement of literature’s tendency to devalue the physical body, despite the body’s power to influence thought and behavior, particularly when it malfunctions, illustrates her era of writing as a possible turning point in literature. Earlier in this essay, she acknowledges the work of Thomas DeQuincey, given his writing about his experiences with opium abuse, as
one of the few exceptions to the general neglect of the body in literature, and her insomniac contemporary Proust as the one of the only to address bodily concerns with any sense of depth, but asserts that there is a general lack of such writing (4). Woolf is ultimately illustrating the importance of bodily states and sensations in influencing perception and interpretation, but also calling on authors to give the body the prominent role it deserves in literature because of the prominent role of the body in daily life and experience. Because insomnia is both a physical and mental experience, the fact that it should be incorporated into texts in the ways Woolf suggests, as a means of “[gazing] through the pane” of the body, it would seem that her contemporaries agree with her argument, and incorporate bodily experience, via insomnia to literary texts, more so in the Modernist period than previous literary eras. If we then add to the structural qualities of the modernist text Woolf’s desire to give the body its own source of expression in the literary work, we can see why insomnia becomes so crucial to the modernist novel. It combines bodily and psychological experience during a specific historical time and place.

**Insomniac Structures**

To describe a model for the way that insomnia can structure texts, and more specifically the modernist text, it is useful to describe the experience of insomnia first. While not all insomniacs have the same experience and the experience of insomnia is often linked to other aspects of one’s subjectivity such as class or gender, it is informative to have a general model in mind. Take, for example this passage from the “Penelope” section of Joyce’s *Ulysses*:

frseeeeeeeerlonnnng train somewhere whistling the strength those engines have in them like big giants and the water rolling all over and
out of them all sides like the end of Loves old sweet sonnnng the poor men that have to be out all night from their wives and families in those roasting engines stifling it was today Im glad I burned the half of those Freemans and Photo bits leaving things like that lying around hes getting very careless and threw the rest of them up in the W C Ill get him to cut them tomorrow for me instead of having them there for the next year to get a few pence for them have him asking wheres Januaries paper and all those old overcoats I bundled out of the hall making the place hotter than it is the rain was lovely just after my beauty sleep I thought it was going to get like Gibraltar my goodness… (754-55)

Molly Bloom’s internal monologue relating her thoughts during a bout of insomnia presents a microcosm of many of the features that one could include in an insomniac literary text. The first feature is the text’s relationship to temporality, associating the action of the text specifically to sleep, but even more specifically to sleep as a woman, as she considers the concept of “beauty sleep.” Significantly, the text is not related to sleep in general but sleep during a specific time and space, as her insomniac thoughts are influenced by her surroundings, indicated by their shift as a result of the train’s whistle and her thoughts regarding her home. Time is presented both chronologically, and cyclically, as her mind races forward in time, planning a future, imagined conversation with her husband, yet also backwards through her memory. She is simultaneously lulled into this stream of consciousness, yet jarred out of it by external factors, including the sound of the train and the warmth of her house. She is also notably empathetic in this passage, as the sound of the train reminds her of the situation of its workers, as they remain separate from their loved ones at night. Her thoughts are blurred together, as they race forward with no discernible separation, indicated by the lack of punctuation. Finally, while the diction, syntax, and pace of the passage suggest anxiety and frustration through the fast pace of this whole
section, she still acknowledges positive consequences to insomnia as she uses it to contemplate her future plans.

If one were to stretch the features included in Joyce’s passage over the course of a novel, it would invariably be a novel structured by insomnia; similarly, even reading this passage conveys to the reader the sense of anxiety and frustration she feels as she lies awake. Many modernist texts encompass some of the features of this passage, including cyclical time, intense focus on psychology, and fragmentary experience, and when used in combination, the texts can provide a structural literary model of the experience of insomnia. To begin, there are numerous examples of modernist texts that open with an awakening, or in other words a body separated from sleep. *Ulysses* is one such example: “Stately, plump Buck Mulligan came from the stairhead, bearing a bowl of lather on which a mirror and razor lay crossed” (3-4). The novel then proceeds to describe his morning routine and breakfast. Joyce doubles this theme of awakening by reproducing a similar scene in the opening of the first section of the second book of the novel (“Calypso”) with the novel’s protagonist, Leopold Bloom, preparing breakfast for himself while his wife Molly remains asleep in their bedroom upstairs (55). While this text does not open with the actual experience of insomnia, it does open with a significant feature of insomnia: wakefulness related to the sleeping state. By situating the novel temporally in the morning, the wakefulness of the text is placed in direct contrast to sleep; the characters were recently asleep, but now they are awake. The wakefulness is not independent of sleep, but has a closely implied relationship to it.
Similarly, Nabokov’s *Lolita* begins with awakening as well, but an awakening of a different sort: sexual awakening. As the novel proper opens (I am temporarily excluding Nabokov’s ironic forward written by the fictional John Ray, Jr., Ph.D.) with the lines, “Lolita, light of my life, fire of my loins” (9), “Lolita” has clearly ignited the narrator’s sexual urges, awakening him in ways he has not experienced since his pubescence. The opening line of the second paragraph, “She was Lo, plain Lo, in the morning…” (9) again emphasizes her role as a stimulant through the immediate connection of Lolita with the morning itself. His reference to her in the morning situates her memory as closely related to his nighttime experiences. She is not just “plain Lo” but only “plain Lo” “in the morning.” “Lo” itself is one of the many variations of her character; others include Lolita, Lola, Dolly, Dolores, and Mrs. Richard F. Schiller. Much as it begins with Humbert’s sexual re-awakening courtesy (he alleges) of Lolita, the novel ends with Humbert preparing for his death, essentially putting both himself and the writing of novel to rest. Yet, his last thoughts are not of death as sleep, but rather the perpetuity of immortality, another sort of unending wakefulness, as he writes, “I am thinking of aurochs and angels, the secret of durable pigments, prophetic sonnets, the refuge of art. And this is the only immortality you and I may share, my Lolita” (309). Using words like “durable” and “immortality,” this passage evokes a sense of the unending. Bronfen writes, “Insomnia draws attention to the threshold between ordinary diurnal thinking and nocturnal recognition relentlessly focused on the nothingness subtending all earthly existence” (161). The opening and closing passages of *Lolita* make the same associations when put together, first with the ordinary, everyday morning vision of
Lo, and then with Humbert’s consciousness of the end of his earthly existence and the possibilities of what he may leave behind.

_Ulysses_, as well, ends not with sleep, but with a sense of the infinite. It begins with awakening, but ends with insomnia. As Bill Hayes notes, Homer’s _The Odyssey_ ends with Penelope and Odysseus preparing for bed: “Wary of being deceived by the gods, Penelope forces Odysseus to reveal the ‘great secret’ of their marriage bed. . . . Immovable, literally rooted to the earth, the bed is the center of their home, symbolic of their love for one another” (Hayes 79). Odysseus’ proof of knowledge of this secret allows both he and his wife to finally get some sleep, together. Joyce has a different (and I would argue uniquely modernist) variation on this ending, in his own revision of Homer’s work, which ends not with rest, but with insomnia. The last section of the novel (“Penelope”) consists solely of Molly’s train of thought as she lays awake in bed, thinking over her many secrets and those of her husband (the passage I cited earlier was just a short part of a very long sequence). _Ulysses_ takes place over the course of a single day. Joyce’s decision to use this diurnal temporality implies the importance of the presence of sleep to the text. Molly’s wakefulness is not simple, everyday wakefulness, but rather wakefulness specifically engendered through the absence of sleep. In other words, the novel does not end with Molly being awake, but rather with her being unable to sleep. Her husband joins her in bed later in the section, and the presence of the sleeping Bloom next to her, whom she wishes would “sleep in some bed by himself with his cold feet on me give us room even to let a fart God or do the least thing better yes hold them like that a bit on my side piano quietly sweeeeee theres that train far away pianissimo eeeeeee one more
song…” (763), reminds Molly of both her inability to sleep and the constraints which her marriage places upon her (also note the shift in thoughts from contemplation to material circumstance, as her stream of thoughts is again interrupted by the train’s whistle). Joyce uses insomnia as an ending to illustrate the perpetuity and seemingly infinite nature of Molly’s thoughts, but also to relate the daily life of Bloom and Molly to their sleep habits. His decision to make Molly an insomniac in this scene, rather than united in separate sleep with Bloom is perhaps indicative of this text’s modernity—their bed does not contain their shared secrets, but their separate ones, making them fragmentary, even as a couple sharing a single sleeping space.

Though Wright’s *Black Boy* is different from *Ulysses* and *Lolita* in that it is an autobiographical, rather than fictional text, like both it begins with an awakening and ends with a failure to sleep. The first words of the text are “*One winter morning in the long-ago, four-year-old days of my life...*” (3). Through this allusion to the morning, Wright opens the text with an awakening, situating the autobiography in direct relation to sleep. In the passage to come, one in which Richard attempts a prank and accidentally sets fire to his family’s home, Richard is awakened both to the discrepancy between intent and outcome, as well as to the complexity of the relationship with his family. He will not get too much rest after this opening sequence as his social, self, and familial conflicts gain traction throughout his adolescence. Again like *Ulysses* and *Lolita*, the ending of this novel tends towards the infinite. The text closes with the following paragraph: “I would hurl words into this darkness and wait for an echo, and if an echo sounded, no matter how faintly, I would send other words to tell, to march, to fight, to create a sense of hunger for life.
that gnaws in us all, to keep alive in our hearts a sense of the inexpressibly human” (384). Much like the closing passage of *Lolita*, in which Humbert claims to share immortality with Lolita through his words, Wright creates a similar sense of the perpetual vigilance of language, but specifically language moving through darkness. Like Nabokov, he gives words agency, or at least hopes they have the ability to carry out his wishes even when he cannot. While people may sleep, words do not, and can carry with them the power of the infinite. Though this closing passage does not deal explicitly with sleep (incidentally other sections of the text do specifically describe Wright’s failure to sleep as related to hunger that “gnaws” in him), it does suggest an unending wakefulness through the text itself.

Thus far, I have given examples of modernist texts that utilize awakening and insomnia to temporally situate the novels, thereby connecting the texts both to sleep and to diurnal rhythms. What I have not yet explained is what makes this tendency specifically Modernist, as certainly plenty of examples of texts from any given literary period include similar imagery, though not necessarily similar structure. As I have posited, the beginning of Modernist period came with the outbreak of World War I. This temporal connection is of particular importance to my argument, as I have argued in my first chapter. Additionally, the amount of people made physically and mentally ill because of the war, either because of physical or psychological trauma made the perceptual changes Woolf explains as part of the experience of illness a widespread phenomenon. As Trudi Tate argues, any modernist literature written after 1914 is inevitably war literature (3).
Such widespread helplessness, both for soldiers and civilians, perhaps contributed to a new sort of narrative developed during the Modernist period, a type of narrative that speaks to feelings of anxiety, frustration, and immobility. Greaney refers to this type of narrative as:

[T]he “world-from-a-bed” tradition in twentieth-century literature, a tradition in which the spectacle of modernity is glimpsed not from the boulevard but from the bedroom. Unlike the flâneur, that mobile eyewitness of the modern cityscape, the horizontal subject is distanced from the spectacle of modernity in ambiguous ways. On the one hand, this figure is luxuriously insulated from the demeaningly humdrum chores of everyday work and survival: the world-from-a-bed narrative traces the workings of a mind that is conscious of everything except the body to which it belongs. On the other, horizontality can be an unenviable predicament, one that speaks of infirmity, paralysis, and claustrophobic immobilization. (4-5)

Just as I have argued in previous chapters that the insomnia is a bodily manifestation of social mores, expectations, identity categories and anxieties, Greaney’s observation creates a similar correlation between lived-experience and narrative structure. The anxiety and changes in the experience of temporality World War I fostered became a new sort of narrative, one from which an anxious, immobile person, isolated from yet a witness to the everyday, narrates from a position of reclusion. This reclusion may be physical, as is the case of Proust’s Marcel in In Search of Lost Time, but it may also be metaphorical. Take Humbert Humbert as an example: one may read him not as an urban flâneur, but as an American flâneur, as he travels the country observing the various idiosyncrasies of American culture. However, these observations are made specifically from a series of beds, or, more specifically, the various motel rooms in which he stays, so he is more of the horizontal flâneur Greaney describes. While he is exploring American culture, he is never integrated into it or interacting
with it as the true flâneur does. Rather, he is “luxuriously insulated” from the everyday, avoiding any sort of “normal” daily existence. Additionally, his obsessive love for Lolita renders him immobile, claustrophobic, fearful and anxious.

This new post-war sense of temporality that shaped the societies in which modernist authors lived is still present in their texts. They do so especially through the endings of their texts, which I have discussed earlier. Humbert speaks of a love for Lolita that transcends time. Since this love has been the essence of his destruction, images of devastation and the infinite are used in combination. Susan Mizruchi argues that there is a connection between Humbert’s (“a European refugee”) experience of both the first and second world wars and his sense of time: “In part because he is so anxious about the passing of time, Humbert, is obsessed with dates. Throughout the narrative, he keeps us informed of the year, sometimes the date and weather, and even the seasonal peculiarities of the place he happens to be” (632). His obsession with dates and times provides evidence of his anxiety over time, trying to retain some sense of control and awareness over something that is clearly beyond his grasp. Joyce, through his fragmentation of the marriage of Bloom and Molly, illustrated through his twist on the ending of Homer’s The Odyssey, illustrates the ignorance and confusion, as well as discontinuous sense of temporality of their daily lives. Wright ends his autobiography with a sense of never-ending battle, through his use of words such as “march” and “fight.” Though none of the authors I have cited in this chapter were directly involved in the conflict of World War I, the war’s influence on their experience of disrupted temporality and continuity, which I discuss in detail in the introductory chapter, is evident in all three texts.
Another relationship between the modernist text and the experience of insomnia comes through the text’s use of temporality, not by day-night associations, but rather through a vacillating movement between past, present, and future. Also as I posit in the introductory section, insomnia before the war was often an insomnia of anxiety regarding the future. Yet, in the modernist insomniac passage, we see insomnia as fixated not only on the future, but also on the present and past. Eluned Summers-Bremner describes the insomniac’s experience of time:

In its unpredictability, insomnia brings that idiosyncrasy back to the insomniac’s small world of one—no one knows when the sleep train will arrive, or the thought-light go out—yet, intriguingly, it also mimics industrial modernity, transposing into the night world operations that have become routine in the day. Like the factory-owner, insomnia thinks ahead and, once started on its labours, builds a senseless momentum. Like the bells and timers factory-owners installed to track worker productivity, insomnia refuses to allow us to be oblivious to our surroundings, to the fact of night. The clock’s strike or digital display repeatedly jolts or frustrates us. (122)

Summers-Bremner’s discussion of sleep as a train is certainly relevant to Molly’s inclusion of the sound of the train in her insomniac thoughts, as she unites regulated, external time with her own experience of time in bed. In her description of the insomniac’s experience of time, Summers-Bremner raises several key points. Initially, she notes that as much as we seek to regulate and designate the use of time, insomnia makes all such systems of order futile, as we can see in the chaotic nature of Molly’s thoughts. Similarly, Humbert may be hyper-vigilant with regard to dates, seasons, and years, but this acknowledgement does not prevent Lolita’s aging beyond the realm of the “nymphet.” Similarly, the insomniac may diligently set aside eight hours for sleep in his or her schedule, but that does not ensure eight hours of sleep will take place, nor does the constant thought “If I fall asleep now, I can still get X
hours of sleep…” ensure any sort of control over sleep quantity. Insomnia also, as Summers-Bremner states, “brings the day into the night,” which occurs in various ways dependent upon the insomniac, who may, on the one hand, spend insomniac time considering daytime worries or may give up on sleep altogether and become active in doing some type of work or leisure activity typically done during standard waking hours. Further, while the insomniac may become temporarily lost in a train of thought, he or she is always brought back to an awareness of the passage of time, making the night seemingly both endless and all too fast, as hours of potential sleep pass away. Time stands still and moves ahead independent of our wants or desires.

What Summers-Bremner describes here in relation to time is an ebb and flow of the insomniac’s thoughts, as they drift from daytime cares or memories of the past to future worries and anxiety over the ever-shortening time left to sleep. However, control of these thoughts, much like control over time, is beyond the insomniac’s powers. The insomniac’s consciousness moves from immersion in a stream of thought to a return to the surface world with realizations of time’s passage. Further complicating matters is an idea I discussed in the second chapter, the idea that insomniacs often sleep more than they realize. So, part of the insomniac’s experience may well be loss of consciousness without consciousness of consciousness’s loss. This cyclical forward and backward movement both through time and states of consciousness mirrors our actual cycles of sleep, an important subject of inquiry pursued by one of the foremost sleep researchers during the Modernist period, Nathaniel Kleitman. As Kleitman argues regarding his observations after nearly forty years of research, which began in the 1920s:
While water and ice are as easily distinguished from each other as wakefulness is from sleep, in both situations temperature data can furnish valuable information. Liquid water may be close to freezing, with its molecules rather sluggish, or it may be near the boiling point, its molecules about to erupt into steam; ice may be about to melt or it may be very cold. And so it is with sleep and wakefulness. The depth of sleep is not the same throughout the night, and by the use of various criteria, depth-of-sleep curves have been plotted. (678)

In this passage, Kleitman notes the distinction between sleep and waking, but also the slippery nature of this distinction. David Randall explains the cycles to which Kleitman alludes further: “Researchers . . . realized that sleep is made up of five distinct stages that the body cycles through over roughly ninety minute periods” (23). These stages include the first stage, in which the sleep is “so light that if you wake up from it, you might not realize that you have been sleeping”; the second stage, which marks a transition from light to deep sleep; the third and fourth stages of deep sleep (the fourth stage is “the farthest your brain travels from conscious thought”); and the fifth, REM stage, is “when most dreams occur” (D. Randall 23). Incidentally, Kleitman is the researcher best known for having made famous the “discovery” of REM sleep. The body then repeats this cycle of ascent and descent from and to unconsciousness multiple times through the hours spent sleeping. Additionally, dreams occupy the space in the sleep cycle closest to reawakening—they are both phenomenologically and temporally the closest to consciousness.

If we apply this sleep cycle to the cyclical thoughts of the insomniac, we can see the progression of “light” insomnia, where the insomniac has not yet realized he or she will not be sleeping (when exactly does not yet having fallen asleep become insomnia, after all?). Then, the second stage connotes a realization of insomnia. The “deepest” stages of insomnia (comparable to stages three and four of the sleep cycle)
are reflected in the insomniac’s seemingly endless train of thought, which typically
alters between past and future, and in some cases, even unconsciousness. The
final, lightest stage of sleep mirrors the insomniac’s return to awareness of his or her
current condition of insomnia and the passage of measurable clock time. While this
cycle of insomnia is more idiosyncratic than sleep cycles in terms of time spent in
each phase, the relationship between the insomniac and his or her consciousness
fluctuates throughout the period of insomnia. Keeping in mind that the widespread
illness and disorder brought about by World War I created a new awareness of the
physical body in shaping perception and experience, it makes sense that the modernist
literary text displays a close relationship between the bodily experience of insomnia
and reflects this experience through the narrative.

Another way through which the structure of the modernist literary work can
both illustrate for and cultivate in readers a sense of insomnia is the presentation of
temporality as cyclical. Molly, for instance, moves from present to past to future in
her thoughts. Additionally, time in the final pages of *Ulysses* is not only cyclical, but
simultaneously frozen and moving rapidly. The time it seems to take to fall asleep
when one has insomnia appears to be unending. Yet, a hyper-awareness of time’s
passage (watching a clock, or hearing church bells marking the passage of hours)
makes time appear to fly, despite the sense of its standing still. The process of
insomniac thought Molly’s passage describes mimics the cycles of sleep, albeit
broken sleep, so that these circadian rhythms become distorted. While these cycles
are cycles of sleep, they also mirror the various stages of insomnia as presented in
literary texts. The first stage is a liminal one—the point at which one is moving from
simple wakefulness to the realization of insomnia. The second is a transition into the deeper stages of insomnia, as marked by the stream of consciousness flow of memory (third and fourth stages). The fifth stage is the stage of moving from insomnia to wakefulness, as in the case of Molly becoming aware of Bloom’s entrance to the bedroom or the bells and train whistles outside.

In *Ulysses*, Molly’s experience of insomnia demonstrates the cycle I have just described. Her thoughts jump from present to past to future, and are disrupted by outside noises (the train whistle and the church bells) (726; 772) and the presence of Bloom sleeping near her (771). She tries to sleep, but finds herself unable to do so, and as she struggles, she becomes aware of time’s passage: “theres Georges church bells wait 3 quarters the hour wait 2 oclock well thats a nice hour of the night for him to be coming home at” (772). Molly continues, “a quarter after what an unearthly hour I suppose theyre just getting up in China now . . . let me see if I can doze off 12345 what kind of flowers are those they invented…” (781). This section lacks any punctuation until the very end, illustrating the racing thoughts of the insomniac.

Molly’s mind shifts from counting to flowers with no transition; all of her thoughts blend into each other. Additionally, though much of the content of the passage is focused on the past, as she traces the origins of her relationships with both Bloom and Blazes Boylan, the passage also indicates a heightened awareness of time, as the church bells remind of her the lateness of the hour. Though Molly expresses frustration at her inability to sleep, the passage ends on positive hopeful note, as she remembers accepting both Bloom’s marriage proposal in the past and says “Yes” in acceptance of their future and the possibility of a simultaneous future with Boylan:
“yes I said yes I will Yes.” (783). The final line of the story places past “said,” future “will,” and present statement “Yes” in association with each other, much as her insomnia makes her experience past, future, and present simultaneously.

Of course, the example of Molly’s insomnia is just that, a literal case of insomnia, with all of its movements from past to present and to getting lost in thought to an awareness of time’s passage and the external world. On a larger scale, Nabokov’s Lolita follows a similar pattern with relation to temporality. According to Elizabeth Prioleau, in Lolita “time and space move backward, doubles proliferate, language fractures into new combinations” (428). She continues, “Central to man’s condition, Nabokov believes, is an imprisonment in time which is ‘spherical and without exits’ (Memory, p. 10)” (429). Nabokov’s sense of time is that of the insomniac and is evident in the way Humbert constructs his narrative. The novel begins with Humbert’s framing of the past as he traces the origins of his pedophilia to a, possibly imagined, childhood relationship with a young girl named Annabel Leigh (an obvious allusion to Edgar Allan Poe’s famous poem, “Annabel Lee”). While initially, the opening sections of the novel immerse the reader in Humbert’s remembrances of the past, these visions of his past are then connected to his anxieties over his present and fears of the future:

I leaf again and again through these miserable memories, and keep asking myself, was it then, in the glitter of that remote summer, that the rift in my life began; or was my excessive desire for that child only the first evidence of an inherent singularity? When I try to analyze my own cravings, motives, actions and so forth, I surrender to a sort of retrospective imagination which feeds the analytic faculty with boundless alternatives and which causes each visualized route to fork and re-fork without end in the maddeningly complex prospect of my past. (13)
Humbert’s writing of his own experience of having memories is significantly related
to the experience of insomnia on many levels. Notably, the past, the future, and the
present are not separated for Humbert, but are complexly interconnected. He is
looking to his past to find something about his present, but also trying to find his
present in his past. He views his past as complex, yet its complexity lies in the future
movement of his constantly multiplying attempts at analysis. This cycling between
past, present, and future analysis of the past represents the insomniac’s drift into
streams of consciousness in which memories and anxieties become intertwined.

Another important feature of this passage is Humbert’s seemingly infinite
capacity to analyze. He can find no conclusion to his thoughts, as they multiply and
build on each other, or, as he puts it “fork and re-fork without end.” Even the word
“re-fork” is suggestive, as a “re” implies a return to something or a repetition, yet “re-
forking” is also a movement forward, infinitely replicated. Here, Humbert’s analysis
of his own thought process expresses a sense of over-determination. Gilles Deleuze
and Félix Guattari argue that “the unconscious itself [is] fundamentally a crowd”
(29). In their terms, “the Wolf is the pack” (31). While Nabokov, whom I have
described earlier as virulently anti-Freudian, in this passage rejects any simple one-to-
one correlation between symbol and meaning, the idea of images from the
unconscious having this infinite capacity for meaning as proposed by Deleuze and
Guattari makes sense. For Humbert, every image or memory creates an infinite
amount of related ideas that can split into endlessly different directions (one can
understand Nabokov’s affinity for the writings of Jorge Luis Borges). So, while the
actual narrative itself is constrained to what is on the page, Humbert implies infinite
possibilities of meaning that lay underneath the narrative structure, as well as the temporal consequences of finding oneself lost in perpetual over-analysis.

The passage from Lolita is a microcosm of the text itself. The novel consistently drifts back and forth between Humbert’s memories and his attempts to editorialize and analyze himself and his actions in the context of those memories. As he becomes immersed in the past, retelling the story, awareness of the present and future is constantly interspersed, primarily in the form of an address to the text’s audience of the future, treating them as though they are listening in the present. For example, immediately upon narrating the process of his search for Lolita after she has left him, he writes, “This book is about Lolita; and now that I have reached the part which (had I not been forestalled by another internal combustion martyr) might be called “Dolorès Disparue,” there would be little sense in analyzing the three empty years that followed” (253). This is not the first instance in which Humbert creates another fictional text from his own text, a future book derived both from his past experience and future completion of his current narrative. Here, both Humbert and the reader are brought out of the memory to both the present and the future. Humbert’s consciousness drifts from his past (and his disruptive habit of over-analyzing that past) to his concerns of both the present (his writing of the narrative and the elements essential to it), as well as the future (the imagined reader’s experience of the text). Humbert can only predict a future audience, as he apostrophizes to Lolita, “neither of us is alive when the reader opens this book” (309). His thoughts are very much a combination of past, present and future, and there is a forwards and backwards cyclical movement throughout the text.
Thus far, we have a beginning of the text that slowly integrates us into the world of the pedophile, just as the insomniac slowly realizes he or she will not be sleeping much on a given night, which I have characterized as the first stages of insomnia. Humbert’s thoughts drift towards the past throughout the text, and often get lost in this past, as an insomniac may temporarily become lost in a stream of consciousness, which are the deeper stages of insomnia. Yet, this same movement towards the past is constantly reunited with the present and the passing of time towards the end of Humbert’s life (he knows, as he writes, that he will soon be executed, another move reminiscent of Poe). At the very end of the novel, Humbert is completely removed both from an immersion in his act of narration and brought back to the surface world, as he realizes the “real-world” consequences of his writing in the form of a possible embarrassment of the now dead (but he does not know she is dead) Lolita, as well as his imminent death. Nabokov, of course, further complicates this schema through his inclusion of “John Ray, Jr., Ph.D.’s” opening remarks, telling readers that “‘Mrs. Richard F. Schiller’ died in childbed,” (4), which foretells of Lolita’s death before Humbert’s narrative has even begun, yet forestalls the reader from knowledge of this event until he or she has neared the end of the text and learns of Lolita’s marriage to Richard Schiller (in the case of a reader with an extremely astute memory), or, more significantly, the reader re-reads the text, beginning the cycle anew, but now with the knowledge that Lolita has been doomed to an early demise from the start. Even his act of requiring the reader to re-read the text to have a more complete grasp of its implications is insomniac in nature. Insomnia relies on the disruption of cyclical patterns of sleeping and waking; *Lolita* is similarly
disruptive, not allowing the reader to “rest” at the end of the text, but requiring that he or she return again to the start, to a re-awakening of the text with the newfound knowledge that Lolita has died before it has all begun.

Most significantly contributing to the insomniac temporal structure of this novel is Humbert’s project of producing Lolita. Carol Shloss relates Nabokov’s past experience with the way in which he links temporality and textuality in the production of texts:

Though [exile from Russia] deprived him of opulence and aristocratic prerogatives, these losses were important not because they caused discomfort, but because they engendered a perspective: loss of childhood homeland became, for Nabokov, a model for all losses of time, and his subsequent vulnerability a spur to re-examine the nature of wealth and the methods of recouping the tangible world’s disintegration. (224)

Perhaps Nabokov hated sleep for a related reason: it is lost time. So, Humbert, a chronic insomniac, often uses his sleep-time to produce the Lolita he desires in numerous ways I will describe. Schloss continues, “Nabokov plays consistently with the analogy between building identity and building a text, and asserts in both instances his invulnerability to misfortune” (225). Much as the text is a production of Lolita, it is also a production of himself, as he begs of the reader, “Imagine me; I shall not exist if you do not imagine me” (129). Like Fitzgerald, his thoughts alone do not make real his existence. Only the reader’s thoughts can do so. Humbert clearly presents his constructed text as a guard against his separation from Lolita, not while alive, but in the afterlife. His story is meant to immortalize their relationship, but also to present it in the carefully shaded light under which he has crafted his narrative.
In introducing both his pedophilia and the profile of the “nymphet,” Humbert makes several notable references to the relationship of the nymphet to time. For instance, he writes, “[In my description of the nymphet] it will be marked that I substitute time terms for spatial ones. In fact, I would have the reader see ‘nine’ and ‘fourteen’ as the boundaries--the mirrory beaches and rosy rocks--of an enchanted island haunted by those nymphets of mind and surrounded by a vast, misty sea” (16). In this passage, time has a tangible presence, manifesting in the physical transition to and then from “nymphet” within a certain age window. Similarly, for the insomniac, the hours of going to bed and having to emerge from bed to face another day, are similar boundaries of insomnia. Further, he writes, “the elusive, shifty, soul-shattering, insidious charm that separates the nymphet from coevals of hers as are incomparably more dependent on the spatial world of synchronous phenomena than on that intangible island of entranced time where Lolita plays with her likes” (17). To recognize a nymphet, “You have to be an artist or a madman, a creature of infinite melancholy” (17). Again, we see Humbert producing the nymphet out of a coincidence of time and space. He looks at the “world of synchronous phenomena” not as a world delineated by time, but by space, much as the insomniac’s experience of time is also linked to the sleeping space. For example, one who is tired but cannot sleep at business meeting does not have insomnia (at that moment), but one who is tired and cannot sleep in his or her bed does have insomnia. Similarly, merely being between the ages of nine and fourteen does not make a young girl a nymphet; she must be linked to other physical conditions, such as “the slightly feline outline of a cheekbone” or “the slenderness of a downy limb” (17). There must be a concurrence
of temporality and spatiality exclusive only to the nymphet, just as there is a similar concurrence in the case of insomnia.

Unsurprisingly, then, insomnia is one of the conditions through which Humbert produces *Lolita* and Lolita, both as narrative and as character. But it is also meant to produce the Lolita he desires. He writes, “What I had madly possessed was not she, but my own creation, another fanciful Lolita—perhaps, more real than Lolita; overlapping, encasing her; floating between me and her, and having no will, no consciousness—indeed no life of her own” (62). What he wants is not a living human being, but a sleeping one. He acknowledges that his textual Lolita is not “real” but only his “own creation” without any personal agency, much like a person asleep. Interestingly, his first “official” molestation of Lolita comes after he has drugged her to sleep (while lying awake next to her observing her every movement). His ability to monitor and manipulate her sleep, while he remains vigilantly awake, is intrinsically related to his ability to (or attempt to, at least) control her. He sees her and his insomnia as closely intertwined, and writes, “So how could I afford not to see her for two months of summer insomnias?” (66). His “insomnias,” which he typically describes as plural, become a necessary state in his relationship to Lolita. For example, it is during his insomnia that he plots the means by which to gain control over Lolita: “As I lay in bed, erotically musing before trying to go to sleep, I thought of a final scheme how to profit by the picnic to come” (54). His intent is to lure Lolita into the woods to molest her, while her mother remains unaware. When this plan fails, he develops another fantasy, which involves impregnating Charlotte so as to place her in “a prolonged confinement” which “would give [him] a chance to be
alone with [his] Lolita for weeks, perhaps--and gorge the limp nymphet with sleeping pills” (80). His fantasy of control over Lolita requires that she be asleep, and his planning takes place when he fails to sleep.

While he never does impregnate Charlotte before her death, his idea of using sleeping pills on both mother and daughter becomes his course of action: “I saw myself administering a powerful sleeping potion to both mother and daughter so as to fondle the latter through the night with perfect impunity” (71). His plan requires two basic factors: their susceptibility to sleep and his confidence in his insomniac ability to remain vigilant and active “through the night.” In the scheme to use sleeping pills, Humbert’s relentless insomnia (or “insomnias”) becomes a source of power. If he can be awake while Lolita and Charlotte are sleeping, unconscious, and unaware, he can do with them as he pleases. But, because he realizes the permeability of the barrier between sleep and wakefulness, he must be careful to strengthen this barrier through the use of sedatives. He begins experimenting on Charlotte’s sleep while Lolita is away at camp, trying various sedatives and doses to find the right formula by which to render her completely unconscious without her noticing his machinations. He describes the steps he takes to bring his plan to fruition:

Throughout most of July I had been experimenting with various sleeping powders, trying them out on Charlotte, a great taker of pills. The last dose I had given her (she thought it was a table of mild bromides--to anoint her nerves) had knocked her out for four solid hours. I had put the radio at full blast. I had blazed in her face an olisbos-like flashlight. I had pushed her, pinched her, prodded her--and nothing had disturbed the rhythm of her calm and powerful breathing. However, when I had done such a simple thing as kiss her, she had awakened at once, as fresh and strong as an octopus (I barely escaped). This would not do, I thought; had to get something still safer. At first, Dr. Byron did not seem to believe me when I said his last prescription was no match for my insomnia. He suggested I try
again, and for a moment diverted my attention by showing me photographs of his family. He had a fascinating child of Dolly’s age; but I saw through his tricks and insisted he prescribe the mightiest pill extant. He suggested I play golf, but finally agreed to give me something that, he said, “would really work”; and going to a cabinet, he produced a vial of violet-blue capsules banded with dark purple at one end, which, he said, had just been placed on market and were intended not for neurotics whom a draft of water could calm if properly administered, but only for great sleepless artists who had to die for a few hours in order to live for centuries. (94)

Humbert’s reference to “great sleepless artists” echoes Hammond and MacFarlane’s correlations between “brain-workers” and sleeplessness, illustrating the degree to which they are connected: only the “great” ones are candidates for the maximum dosage of sleeping pills. Though Humbert later realizes that “the purple pills did not even belong to the big and noble family of barbiturates, and though it might have induced sleep in a neurotic who believed it to be potent drug, it was too mild a sedative to affect for any length of time a weary, albeit weary, nymphet” (128), his attempted use of such pills is significant. This passage playfully illustrates the authoritative physician, skeptical of Humbert’s motives, giving him a placebo in place of a strong narcotic. But, more importantly, this passage points to Humbert’s desire to control through sleep. His nightly observations are quite reminiscent of yet another of Poe’s tales, “The Tell-Tale Heart,” in which the narrator spends a week observing the sleep of his murder victim, plotting the perfect time to act without awakening the old man whom he kills. Humbert is similarly vigilant in his observations of Charlotte, and renders her comical through the various experiments he performs on her.

After Charlotte’s death, when it comes time to try his experiments on Lolita, he turns to the literary to illustrate how, through the manipulation of her sleep, he
attempts to become her author or creator. Once he drugs her with the ultimately ineffectual purple pills, he spends a whole night of heart-burn ravaged insomnia observing every minutia of her sleep, waiting for the right moment to act. Yet, the right moment does not arrive, as her sleep remains fairly light and she responds to his movements and presence. While waiting, he composes a fantasy version of their first coital encounter in which he can have his way with her, yet, by keeping her unaware, maintain her innocence: “She was fast asleep again, my nymphet, but still I did not dare to launch upon my enchanted voyage. La Petite Dormeuse ou l’Amant Ridicule” (129) (another example of a theoretical text Humbert “invents” in the novel). By giving their “story” a title, Humbert emphasizes his authorship of Lolita, but can only do so once he has diminished her agency through manipulating her sleep. Yet, his insomnia fails him, and “Time and again, my consciousness folded the wrong way, my shuffling body entered the sphere of sleep, shuffled out again, and once or twice I caught myself drifting into a melancholy snore” (131). Of course, his plan to molest the unconscious Lolita fails and she is quite conscious when they “consummate” their relationship: “by six she was wide awake, and by six fifteen we were technically lovers” (132). She resists, through awakening, his attempts to create her in the image of the innocent object he desires, takes on some form of agency, however perverse, in their sexual relationship, and in doing so, refuses to take on the form he desires. She may be his lover as he desires, but she will not be the untouched virgin for whom he hopes. As James Tweedie argues, “Humbert’s main source of anxiety is the realization that Lolita maintains an identity outside his self-contained realm, and in his memoirs, he searches for a medium to enforce her isolation while permitting his
singular mannerisms to survive” (161). One “medium” Humbert attempts to use is the sleeping pills, which both “enforce her isolation,” as she is literally cut off from the world when asleep, and also strip her of her individual identity, as with sleep comes the loss of individually acknowledged subjectivity. Particularly revealing is the mention Humbert makes of Lolita’s “sobs in the night—every night, every night—the moment I feigned sleep” (176). Here, we can see the war between their two subjectivities, where they both use the sleep of the other to become more themselves. When others are asleep, there is no longer a need to hide oneself—the problem becomes what occurs when one only appears to be asleep and inadvertently reveals something to an aware observer. Tweedie continues, “But in moments of despair, he realizes the difficulty, even impossibility of such a project because he is a prisoner not only of his solipsism but also of his own narrative, a mirror of sorts, which reflects its author as accurately as its ostensible subject” (161). In constructing his narrative, Humbert has constructed himself as a subject as much, if not more, as he has constructed Lolita, and Nabokov subjugates all of his characters. Tweedie views Humbert as a “liminal” figure (161), and this liminality can be read as the liminality of authorship, a sort of insomnia between awareness of subjectivity and loss of subjectivity, but evident of the inescapability of subjectivity when conscious.

This novel, then, takes on an insomniac temporal structure for a variety of reasons. It is insomniac, in part, because of the constant fluctuations between and melding of past and present that we see in Humbert’s narrative, as well as Humbert’s hyper-awareness of the passage of time. It is also situated between an awakening invocation of a mortal subject and an awareness of impending death concurrent with a
closing apostrophe to an immortal image, whom, as we learn from the start of the text that frames Humbert’s narrative, is no longer alive, but can only be re-subjugated through language. As Prioleau argues, numerous circumstances in the novel, including shocking and accidental deaths of both Humbert’s mother and Charlotte, “all bespeak a reversal of rational, sequential experience in his ‘memoir’” (433). The events of the text rely on the insomniac’s vigilance, but also note the failure of that vigilance despite the will to maintain it, illustrating insomnia as a conflict of will and desire. Most significantly, the text posits insomnia as the temporal space of authorship, as Humbert requires both his insomnia and Lolita’s sleep to create her as the subject of his desire. Through the text, we see Humbert’s struggle to control his own subjectivity through his wakefulness and alertness, yet, he still becomes the subject of the narrative, and, quite comically, a subject to be studied by “parents, social workers, educators” who must “apply [themselves] with still greater vigilance and vision to the task of bringing up a better generation in a safer world” (6). The passage just cited is the last sentence of the introduction written by “John Ray, Jr., Ph.D.,” which encourages the reader’s vigilance as a mirror to Humbert’s, emphasizing the reader’s own possible insomnia (“vigilance”) generated by the text. But, as the text suggests through the obvious irony of “Ray’s” introduction, even extreme vigilance is fallible.

Literary texts play with temporality in a way that relates the narrative to insomnia, but the autobiographical Black Boy does as well. Wright’s non-fiction text can be viewed as a melding of past and present. His rewriting of his past from the vantage point of the present, with an eye towards the future at the end, indicates the
fusion of these three temporal states. In many ways, Wright is doing through his writing exactly what Hayes does in his periods of insomnia, when he “[recalls his] entire life” (3) as a way to put himself to rest. In describing his decision to begin his own writing, he writes:

I picked up a pencil and held it over a sheet of white paper, but my feelings stood in the way of my words. Well, I would wait, day and night, until I knew what to say. Humbly now, with no vaulting dream of achieving a vast unity, I wanted to try and build a bridge of words between me and the world outside, that world which was so distant and elusive that it seemed unreal. (383-84)

His desire to begin writing his story is a story of waiting, in this case not for sleep, but for the words of the story itself to emerge, a waiting that takes place both during day and night. Writing for Wright, like sleeping for an insomniac, is an end to the period of waiting for “a bridge” to a “distant and elusive” world when the waiting ends.

As he tells the story of his upbringing, Wright describes the relationship between his insomnia and the conditions of his life. Of the relationship between his family’s poverty and his insomnia, he writes:

Hunger stole upon me so slowly that at first I was not aware of what hunger really meant. Hunger had always been more or less at my elbow when I played, but now I began to wake up at night to find hunger standing at my bedside, staring at me gauntly. The hunger I had known before this had been no grim, hostile stranger; it had been a normal hunger that had made me beg constantly for bread, and when I ate a crust or two I was satisfied. But this new hunger baffled me, scared me, made me angry and insistent. (14)

This passage is of particular importance because of its use of temporality. Wright, as he acknowledges in this passage, was no stranger to hunger. Yet, until his hunger awakens him and instigates his insomnia, he had been able to remain relatively independent of it. However, once his hunger awakens him, we see a union of past
(hours and weeks of insufficient food) and present (awakening hungry). One does not instantly experience hunger, but rather becomes hungry, or at least hungry in the way Wright describes, over a period of time; his type of hunger is an accretion of various hungers, related to lack of food, but more importantly his race, class, family relationships, physical habitation, and a variety of other elements of his subjectivity. The moment of insomnia that prompts his future actions (“beg constantly for food”), unites his past with his present, but also determines his future course of action.

Other examples of Wright using the time and space of insomnia as a temporal device include a passage in which Wright spends his first night living with his uncle and finds out he must sleep in the former bedroom (and bed) of his deceased cousin:

I groped into the dark room and fumbled for the bed; I had the illusion that if I touched it I would encounter the dead boy. I trembled. Finally I jumped roughly into the bed and jerked the covers over my face. I did not sleep that night and my eyes were red and puffy the next morning. . . . The next night was the same; fear kept me from sleeping” (94).

In this passage, we see the time and space of insomnia as a convergence of past, present, and future. In the textual present (which is also the textual past as Wright recreates his narrative), young Richard is forced to confront both his family’s past (the death of his cousin) and his own future (a new life with his aunt and uncle) simultaneously. His sleeplessness continues for a week:

I spent another sleepless night, shivering in the dead boy’s room—it was not my room any longer—and I was so frightened that I sweated. Each creak of the house made my heart stand still. In school the next day I was dull. I came home and spent another long night of wakefulness and the following day I went to sleep in the classroom. When questioned by my teacher, I could give no answer. Unable to free myself from terror, I began to long for home. A week of sleeplessness brought me near the edge of nervous collapse. (94-95)
His insomnia becomes so problematic that not only does it have an adverse effect on his education, it also leads to a confrontation with his aunt and uncle that eventually results in a beating and a return to his grandmother’s house, as he can no longer stand to live with them. Insomnia becomes yet another turning point for Richard, forcing him to confront his family’s past and significantly impacting his future.

One additional insomniac episode again speaks to the unification of past, present, and future within the text. Wright writes:

I used to lie awake nights and think back to the early days in Arkansas, tracing my mother’s life, reliving events, wondering why she had apparently been singled out for so much suffering, meaningless suffering, and I would feel more awe than I had ever felt in church. My mind could find no answer and I would feel rebellious against all life. But I never felt humble. (156)

In this passage, we see Richard thinking not only about his own past, but about his mother’s. However, his mother’s past goes back even farther than her actual lifespan, as Wright seems to trace her sufferings not only to her experience, but to the historical experience of both African Americans and women. His thoughts move towards the past, through his reminiscences, as they simultaneously lead him to an attitude of future rebellion. This rebelliousness leads to a confrontation with his uncle, interestingly about time itself. Richard snaps at his uncle, who has asked for a confirmation of the correct time. He writes, “I was tired, sleepy; I did not want to look at the watch again, but I was satisfied that, on the whole, I had given the correct time” (157). His uncle challenges his timekeeping, eventually leading to physical threats both from the uncle to Richard and from Richard to the uncle, as Richardthreatens to slash his uncle with razors if his uncle attempts to beat him again. This motif of time itself as a source of conflict underscores the importance of insomnia as
a temporal-structural device, as these insomniac moments of convergence continue to fuel the narrator’s anger, determine his future actions, and force him to confront his and his family’s past. The scenes I have described in these paragraphs deal directly with experiences of insomnia, but they have overall structural significance as well, and serve as a model for the narration as a whole. These scenes are microcosms of the structure of the text, which seeks to draw connections between confronting one’s individual and historical past in a way that makes future actions almost inevitable. Just as his insomnia leads to poor performance in school, despite the narrator’s innate intelligence and love of reading and learning, his forced confrontation with the conditions of his and his family’s past create a circumstance from which anger and rebellion become almost pre-destined. Throughout the text, Wright gives a sense of acting in a way he knows to be morally and ethically questionable, citing instances of various confrontations with family members, school or neighborhood children, and even drunkenness at a young age, but he also describes these various scenarios in a way that makes his actions seem as though they are beyond his control, much like his insomnia or the next-day exhaustion that follows it. His actions and descriptions consistently unite his past circumstances to his present ones, but also shape his future.

**Insomniac Language**

Not only does the modernist text have a particularly complex relationship with temporality, specifically waking and not sleeping, as well as the convergence of past, present and future, it also has a complex relationship with language (as does any literary work, of course). But, just as in the way insomnia makes thoughts almost seem to explode and multiple, the modernist text does so through its use of language.
As I argued in the first chapter, World War I not only changed the individual’s relationship to the his or her body forcing an awareness of the body as perceptual filter, and his or her experience of the passage of time, but also to language. To inform my current discussion, I would like to reiterate two important, and conflicting, points. Language, following the war, became increasingly reliant on the binary (reflecting the “us” versus “them” and “good” versus “evil” mentality of the war), and language itself was seen as inadequate in portrayal of the war experience. Thus, experience only became represent-able through the replication of experience through art. What then do we make of an art reliant upon language, as literature is? Literature in order to convey any sense of significant meaning at all must be as much a representation of experience as any other art form, and it does so, in part, through its resistance to overly-simplistic binary language. Insomnia, itself a form of resistance against the overly-simplistic binary of sleeping and waking, becomes a method of both creating a literature of experience and using language in a way that resists reduction. Thus, it is important to pay attention to the language used within the insomniac sequence and text, as well as the language describing insomnia itself.

Insomnia and language are also related because of the insomniac’s lack of control over the flow of language. During a period of insomnia, one cannot stop one’s thoughts as they shift and multiply. Molly’s monologue is an excellent example here, as are Humbert’s references to the “re-forking” of his thoughts. In this sense, language becomes symbolic of insomnia itself in its refusal to be controlled. An insomniac may obsess over a word or phrase. More importantly, insomnia is resistant to a clear, stable definition (as many doctors note that insomnia is unique to
each individual) rooted in binaries (what is the opposite of insomnia?). So, we have a condition resistant to language in which the sufferer experiences language as just as far beyond his or her control as sleep itself is. Insomnia is a contextual multiplicity; in other words, insomnia is both unstable in its definition and only recognizable through context, which involves individual circumstance, and at times misperception. Placed in the context of an era during which people attempted to stabilize an upended world through the reduction of language to binaries, yet simultaneously noted the failure of these binaries to convey experience, a condition that explodes both binaries and language is extremely relevant.

Jacques Lacan argues that language structures experience: “it is the whole structure of language that psychoanalytic experience discovers in the unconscious” in part because “language, with its structure, exists prior to each subject’s entry into it a certain moment in his mental development” (139). “The subject,” Lacan continues, “is still more the slave of a discourse in the universal movement of which his place is already inscribed at his birth” (140). Language, for Lacan, not only structures our experience of the world, this structure already existing in the mind of the individual before the he or she is able to use language, it also immerses the individual into a discursively derived identity, rooted in historical time and place. Insomnia reveals our inability to control both language and the relationship between our bodies and minds, thus essentially revealing that while such a structure may exist, this structure is beyond our control. We cannot control the way our minds are structured any more than we can control what happens to our loved ones in a war. This revelation is particularly appropriate during an era in which a sense of lost control was pervasive,
and one way in which the modernist text reflects this sense of lost control is through the use of the chronotope of insomnia in which language itself is beyond control. Through illustrating language as over-determined, in which meaning is unstable and exists only in multiplicities, instability and lack of control are made apparent.

Regarding Modernism, Peter McHugh argues that it “persistently follows and works out the inevitable variability in relation between sign and meaning. . . . Modernism seemed to struggle to tame this variability,” and he views the “value [of this relationship] as uncertain” (26). Humbert struggles with this variability as he tries to recount the story of his love for Lolita. One example comes with Humbert’s use of Lolita’s name throughout the text. Humbert, who says, “Oh, my Lolita, I have only words to play with!” (32) illustrates both the power of language to attempt to “[work] out” the relationship between words and meaning, but also the failure of language to truly consolidate and capture meaning. For this reason among others, perhaps, Tweedie refers to Lolita as a text written about “a country on the slovenly verge of postmodernity, with its farrago of displaced images and styles” (153). The word Lolita is only a word, after all. As Tweedie points out, “Nabokov has created in Humbert Humbert a narrator who strives with great alacrity, even desperation, to capture perfectly in words a human form; the tragedy of the novel is his eventual, overdetermined, costly failure. Lolita exists as a subject and object somewhere in Humbert’s prose, but nowhere beyond the text” (169). In insomnia, words and images multiply endlessly in meaning, yet in doing so, fail to retain any meaning at all outside of the mind of the insomniac. As Woolf argues, “In illness words seem to possess a mystic quality. We grasp what is beyond their surface meaning” (“Ill” 21).
The same can be said of the word *Lolita* for Humbert. Knowing that she has already died before the text was written, and knowing that her given name is not even Lolita, she is only a word, a word with infinite meanings and possibilities, but she cannot exist as more than a word without the text itself. Tweedie writes, “that word both begins and ends his narrative, creating a closed circuit, and endlessness, a perfection of form redolent of his earlier narrative goals” (168). As Tweedie illustrates, the word *Lolita* binds the text together, with awakening on one hand and death with hopes of immortality on the other. While the word is in use, the novel is insomniac, trapped in “a closed circuit” with a sense of “endlessness”--words one would use to describe the ontological experience of insomnia.

Nabokov’s insomniac usage of language extends beyond Lolita’s name into much of his diction and syntax. Tweedie argues, “Down to the level of his sentence structure, to his penchant for periodic and (surprisingly for such a demanding stylist) rambling sentences, Humbert’s style reflects his aversion to ends” (160), and insomnia is arguably an aversion to ends also. Much as Joyce uses Molly’s rambling, disconnected, and unpunctuated monologue to both express and replicate her insomnia, Humbert’s sentences create the same effect. For example, Humbert writes:

> My very photogenic mother died in a freak accident (picnic, lightening) when I was three, and, save for a pocket of warmth in the darkest past, nothing of her subsists within the hollows and dells of my memory, over which, if you can still stand my style (I am writing under observation), the sun of my infancy had set: surely, you know all those redolent remnants of day suspended, with the midges, about some hedge in bloom or suddenly entered and traversed by the rambler, at the bottom of a hill, in the summer dusk; a furry warmth, glowing midges. (10)
The length of this sentence suggests Humbert’s inability to end it, as it continues on and on, with parenthetical interjections, images of liminality, and acknowledgement of both mental and syntactic rambles. Though Humbert is ostensibly trying to put the image of his mother to rest and quickly introduce and dismiss her presence in his life, this sentence does anything but, and ends with images of a permanent sense of being trapped between daylight and nighttime, not fully awake, yet being unable to sleep. Even Nabokov’s use of the twice repeated word *midge* is significant to this passage’s meaning. Nabokov, known for his entomological interests, deliberately chooses not one particular and specific image of an insect to use, but a word that encompasses several different species of small flying insects who occupy a wide range of habitats, some of whom are vampiric and transmit disease. Nabokov, who mocks translators who inaccurately claim Kafka’s character Gregor Samsa is a “flat cockroach” rather than “a domed beetle” (*Strong* 55), certainly could have provided a more specific insect term than “midge” if he had chosen to do so. Yet, through his choice of this vague and over-determined insect name, clouds of them in fact, he illustrates Humbert’s unwillingness or inability to pin anything down. On the one hand, Humbert asserts his infancy is over and his mother is dead, but on the other, the images and memories persist within him refusing to come to an end, just as his sentence persists on the page itself.

Nabokov’s use of spider-imagery related to Humbert is another instance of the over-determination of language within this text. Humbert writes, “I am like one of those inflated pale spiders you see in old gardens. Sitting in the middle of a luminous web and giving little jerks to this or that strand” (49). Regarding this passage,
Tweedie connects the spider imagery to Humbert’s “plurality of focus” (154). Indeed, the image of the spider, which also makes an appearance in Nabokov’s novel *Invitation to a Beheading*, as a spider who vigilantly watches Cincinnatus’ every move, illustrates both plurality and vigilance. This spider is simultaneously creator and destroyer, as it weaves a web intended to trap its prey. Similarly, Humbert is a creator, as he produces Lolita through his text, but upon trapping her in his web of machinations, he ultimately destroys her. In addition, the spider’s ability to maintain vigilance over all parts of its web, the various strands it controls, mirrors Humbert’s perpetual vigilance over every aspect of Lolita’s conscious and unconscious activity. Additionally, the spider plays both heroic and villainous roles, trapping harmful insects in its web (as Humbert eventually traps the predatory Clare Quilty), yet also harming even the most benevolent of insects. Just a spider can theoretically generate an infinite web, the image of the spider can generate infinite possibilities of meaning.

Another level at which Nabokov utilizes over-determined and unending language is through his use of tmesis, as Tweedie notes. Tmesis, the immersion of one word into another to create a whole new word or phrase, disrupts typical linguistic cycles and expectations. Tweedie writes:

> Humbert repeatedly pries apart common phrases to insert the world outside his solipsism. But unlike the classical model where necessity is parted for the sake of art, the order is reversed in Humbert’s fantasy world: tmesis allows ends to rush back in. Images that traditionally evoke nostalgia become symptomatic of inevitable decay. (156)

One example of this “phrasal tmesis” Tweedie discusses comes with Humbert’s assertion that “The rapist was Charlie Holmes. I am the therapist—a matter of nice spacing in the way of distinction” (*Lolita* 150). The introduction of a space,
transforming “therapist” into “the rapist” illustrates the ways in which Humbert uses language, or in this case, its absence, to generate meaning. If we look at therapy in the way Nabokov (controversially) suggests, as a fraudulent quest for symbols and manipulation of the subject, Humbert is both therapist and rapist to Lolita. He is also the void between the *the* and *rapist*. Much as the Lolita of the text is not the “real” Lolita, drawing readers’ attention not to her presence but her absence, Humbert’s attempts at creating himself are reliant on a similar void. As readers follow Humbert’s narrative, it becomes clear that the Humbert produced by the text is not the “real” Humbert. Rather, the text, through what Humbert does not say or do, reveals a very different Humbert, thus his identity is just as present in the space between therapist and rapist as it is in either word.

For Joyce, the use of language within *Ulysses* is also highly over-determined. In *Ulysses*, nearly every word has a multiplicity of meanings; however, the Nighttown scene (“Circe”) presents a perfect example of novel as “threshold zone.” Within the Nighttown scene, in which narration shifts between Stephen and Bloom, Joyce illustrates this sense of multiplicity. The imagery is surreal, much of it hallucinatory, making it difficult to distinguish “real” from unreal and sleeping from waking consciousness. Images constantly morph into other images and people change into other people. This scene is one that blurs the lines between dream and wakefulness, exchanging perception with over-determined symbol and fear with nightmare. This scene is a representation of liminality, both structurally (shifts of narration) and in terms of content (reality and hallucination). For example, in this section, the “Timepiece” is given a voice, which declares “Cuckoo” three times over (469). Even
this simple word, one attributed to an insentient object (notably one that measures time), is over-determined. For one, the declaration marks the passage of time, specifically a time when most people are asleep, if we read this as three in the morning. Secondly, the word cuckoo can also mean mentally unstable, which is fitting in a hallucinatory scene during which Bloom’s state of mind is in question. Thirdly, the word is phonetically similar to the earlier used word “cuckold” (469), used to describe Bloom’s status within his marriage to the unfaithful Molly. Finally, the word becomes symbolic of the judgment placed upon Bloom (or the self-judgment he fears) as mentally unstable and cuckolded, as sounding of the clock signals the presence of the jury who emerges from behind “a panel of fog” (469). This one over-determined word has both symbolic and structural significance within the text, marking time’s passage, calling Bloom to judgment, and exposing the instability of his psyche, as well as his marriage. The word’s associations with time (three in the morning) and mental stability connect the word with insomnia as well.

For Wright, much of the over-determination of language comes through his attempts at dealing with race relations, something he struggles to control but cannot. He is aware that as a black man, even the most innocent phrases or gestures can put him at great risk. He writes of the difference in language for blacks and whites:

[Wright’s boss’s client] had not asked me for this long explanation, but I had spoken at length of fill up the yawning, shameful gap that loomed between us; I had spoken to try to drag the unreal nature of the conversation back to safe and sound southern ground. Of course, the conversation was real; it dealt with my welfare, but it had brought to the surface of the day all the dark fears I had known all my life. The Yankee white man did not know how dangerous his words were. (There are some elusive, profound, recondite things that men find hard to say to other men; but with the Negro it is the little things of life that become hard to say, for these tiny items shape his destiny.
A man will seek to express his relation to the stars; but when a man’s consciousness has been riveted upon obtaining a loaf of bread, that loaf of bread is as important as the stars.) (232)

Growing up in the South, Wright is conditioned to speak in two very different languages, one of submission to whites, and the other of fraternity to blacks. So, for him, even an expression of a most basic truth, that he is hungry, becomes problematic when speaking with a white person, who may interpret the statement as a complaint against him or herself or social hegemonies. Not only must Wright carefully watch what he does say, considering every possible interpretation of his words to be sure and choose “safe” ones, he must also watch what he does not say, as there is power in the gaps of conversation as well (related also to gaps in consciousness during insomnia). The significance of language is emphasized throughout this text, as the choice of the proper word for a given situation could be, for Wright, the difference between safety and threats of or actual violence against him.

**Stream of Consciousness**

The preoccupation with sleeping and waking, as well as the tendency of words and images to multiply in meaning, evading control as sleep evades the insomniac, are only some of the many textual features that equate the modernist text with the experience of insomnia. Another common feature is the intently psychological nature of both the modernist work and insomnia. Of course, this is not to argue that nineteenth century texts or contemporary works do not have any focus on psychology, but rather that this feature is especially important to the modernist work, which often emphasizes psychological development over plot development. In other words, novels such as Dickens’ *Great Expectations* or Joseph Sheridan La Fanu’s
Carmilla require a lengthy of events given the intricacy of their plots. On the other hand, novels such as Woolf’s Mrs. Dalloway, or Joyce’s Ulysses require only a simple explanation of the plot: in Mrs. Dalloway, Clarissa Dalloway throws a party, to which she invites friends she has not seen in a long while, and Septimus Smith attempts, with the help of his wife, to treat his war trauma, but ends up committing suicide. Likewise, in Ulysses, Harold Bloom walks around Dublin, attends a funeral, meets with various people, eats lunch, goes to a beach and a brothel, and comes home to his wife who is awake in bed. This, of course, is not to say that either of the latter two novels lack in complexity, but the complexity lies primarily in the psychological development of the characters, rather than the intricacy of events.

One of the structural features attributed to the psychological nature of the modernist text is the stream of consciousness form of narration. William James, who first developed the metaphor, explains: “Consciousness, then, does not appear to itself chopped up in bits. Such words as ‘chain’ or ‘train’ do not describe it fitly as it presents itself in the first instance. It is nothing jointed; it flows. A ‘river’ or a ‘stream’ are [sic] the metaphors by which it is most naturally described” (“Stream” 159). For James, while awake, consciousness never stops. In fact, James sees the only true disruption of this stream of consciousness as sleep. He writes, “When Peter and Paul wake up in the same bed, and recognize that they have been asleep, each one of them mentally reaches back and makes the connection with but one of the two streams of thought which were broken by the sleeping hours” (“Stream” 158). The stream to which Peter returns is Peter’s and Paul returns to Paul’s stream. As an interesting aside, it might be worth considering James’ choice of the names Peter and
Paul in this passage, given their association with the failure of vigilant wakefulness.

Peter and Paul were among Jesus’ disciples and play a role in Christ’s betrayal specifically because they fall asleep, allowing Judas to commit his act of betrayal: “And he come unto the disciples, and findeth them asleep, and saith unto Peter, What, could ye not watch with me one hour?” (Matthew 26:40). Jesus then asks his disciples to remain vigilant, but finds them asleep again: “And he came and found them asleep again: for their eyes were heavy” (Matthew 26:43). It is while the other disciples sleep that Judas betrays Jesus. Thus, if anything, James’ choice of names of his two sleepers has interesting connotations with the disconnect between conscious vigilance and the lack of awareness sleep entails. Sleep is a betrayal of vigilance.

The stream of consciousness and its associations with vigilance is critical in the modernist text. The modernist text, if it did not invent this form, certainly perfected it, and many modernist literary works use this as a device. It is not coincidental, in light of the changes of literature that took place after the World War I that I described in the first chapter, that this device becomes so popular in this specific historical period. It is a device through which the text becomes experiential for the reader. In other words, there is a phenomenological aspect of reading a stream of consciousness narration that evokes the experience of insomnia in the reader (whether or not the actual stream of consciousness passage takes place during the character’s insomnia, which often it does). Indeed, both *Ulysses* and *Lolita* utilize this method of narration. In *Ulysses*, the passage that consists of Molly’s insomnia discussed earlier is an excellent example of stream of consciousness writing. Similarly, both Nabokov and Wright often allow readers to become immersed in their
characters’ streams of thought. Immersion in a stream of consciousness is, as I have argued, a phenomenological feature of insomnia (though this immersion vacillates according to the “cycles” of insomnia I have described earlier). Through replicating this sense of immersion in this stream, the text replicates the experience of insomnia.

Because insomnia takes place in isolation, often without outside stimuli, the insomniac too finds himself or herself immersed in a stream of consciousness. While this stream is not exclusive to insomnia, as James notes, a heightened awareness of the flow of one’s thoughts is certainly characteristic of insomnia, given the lack of other stimuli often present as one awaits sleep in a darkened room; there is not much else to experience other than one’s bodily sensations and thoughts. Modernist authors often use this idea of the stream of consciousness as a literary device, illustrating the often haphazard nature of thought, perhaps with the input of bodily perceptions Woolf suggests. Thus, this use of the stream of consciousness is one way in which the phenomenological experience of insomnia makes its way into the modernist text.

Take, for example, the following passage from *Ulysses*, as thought by Bloom:

> Did I write Ballsbridge on the envelope I took to cover when she disturbed me writing to Martha? Hope it’s not chucked in the dead letter office. Be the better of a shave. Grey sprouting beard. That’s the first sign when the hairs come out grey and temper getting cross. Silver threads among the grey. Fancy being his wife. Wonder how he had the gumption to propose to any girl. Come out and live in the graveyard. Dangle that before her. It might thrill her first. Courting death … Shades of night hovering here with all the dead stretched about. (107-08)

In this stream of consciousness passage, we see the seeming randomness of Bloom’s thoughts as they flow from one subject to another. Of course, Bloom is not experiencing insomnia during this passage. But, my argument here is not that stream
of consciousness is an exclusive feature of insomnia (it is not), but rather that the individual gains a heightened awareness of the stream of consciousness in the insomniac state. With regard to reading a text, the reader also experiences a heightened awareness of the immersion in the stream of consciousness when this device is used by the author. So, in essence, while stream of consciousness for the character does not necessarily indicate insomnia, the phenomenology of the reading experience of this device replicates features of the phenomenology of insomnia.

James envisions a model of consciousness in which thoughts flow continuously, yet are often trapped in “the pails and the pots” within the stream (thoughts on which we focus intently for a while), “still between them the free water would continue to flow” (“Stream” 165). Even when one focuses on a single idea for a given period of time, an undercurrent of thought always remains, as we can see when Bloom contemplates related ideas within the above passage. He pauses on a singular thought momentarily, but the next thought is already determined based on his surroundings. Thus, his seemingly random movements from thought to thought actually correlate to his movements around Dublin. These points of focus, for James, are not breaks in the stream of consciousness, but rather intrinsic to it. Yet, if we take insomnia for a model, we can see that sometimes there are gaps in consciousness of which the subject is unaware. Bloom’s stream of consciousness displays similar gaps, not in awareness, but rather in the movement from one thought to another, another phenomenological similarity. In other words, to be conscious of the letter to Martha means temporarily being unaware of his beard growing, and so forth. In the second chapter, I discussed the possibility that insomniacs sleep more than they
know, illustrating gaps and shifts in this stream. If this is the case, then that stream of consciousness is broken by unconsciousness, as James says, yet the subject is not aware of the unconsciousness, so, is therefore not aware that the stream has been temporarily severed. The reader’s experience of reading the stream of consciousness narrative replicates the nature of insomniac thought with its combination of flow, gaps, and shifts.

Contemporary sleep researcher Stanley Coren provides a real world example of his experience of unconsciousness of unconsciousness, upon arising up from a night in which he had believed himself to have not slept at all:

Although I felt that I had been wide awake all night, I had actually been so soundly asleep that I had completely missed an earthquake that had brought down a large quantity of plaster from the ceiling onto our bed. In fact, as I got up, two large chunks of plaster, each the size of a tennis ball, rolled off of my chest, where they had apparently been resting for an hour or more since the earthquake. (15)

Coren gives us an example of his unawareness of his consciousness transitioning to unconsciousness, in a way similar to that in which Bloom’s thoughts drift, without any apparent awareness on his part, from one impression to another. Coren’s model of sleep and wakefulness is similar to James’ stream and bucket model, in which one’s thoughts both simultaneously focus and continue running. Coren’s mind was asleep, yet despite this fact, he had a distinct sense of the continuity of his thoughts, though this seeming continuity was later disproven by the realization of the earthquake’s occurrence. These sometimes repetitive transitions between consciousness and unconsciousness, all experienced under the larger umbrella of insomnia points to a type of consciousness that is neither fully awake nor fully asleep.

**Metafiction as Awakenings**
This liminal consciousness can be compared to the act of writing. As Farbman argues, “Writing is not just committing black ink to a white page—here with pens, there with presses. The real location from which it emerges is a Grayer area” (15). This “Grayer area” is a space of movement from the self to the unidentifiable other, the author’s consciousness as I to the author’s consciousness as text (Farbman 48). This “Grayer area” Farbman describes is also a state of liminality, and the author is essentially “falling asleep” into the text, in a transitional state between consciousness as subject (gendered body, citizen, and so forth) to consciousness as creator. The creator-consciousness is necessarily that of the “other” to which Farbman alludes, as one cannot simultaneously be a subject and exist beyond subjectivity, as “God-like” figure ruling over the world of a text, an ante-subject to the subject. Yet, the author makes this transition. When discussing his own method of creating characters, Nabokov describes those authors who allow their characters to “take hold of them” as “very minor or insane.” He continues, “I am the perfect dictator in that private world [of the created text] insofar as I alone am responsible for its stability and truth” (Strong 69). Through his process of writing, he has moved from subject of the “real” world to creator of the textual world. This liminal position, hovering between subjective reality and creation of the objective textual world is akin to the loss of self that happens when one falls asleep. One moves from pure subject to pure object (bodily mass). Insomnia traps someone between these two states.

This sense of the cyclical experience of diminishing awareness of the self and return to the self is replicated in the modernist text through the use of metafictional devices. When an author draws a reader’s attention to the fictionality of the text that
the reader is currently immersed in, it has the effect of temporarily preventing the reader’s immersion in the text, thus drawing him or her back to self-awareness.

While Wright’s text is non-fictional, and therefore makes no effort to draw attention to its fictionality, it does draw awareness to its status as a text, especially through Wright’s discussions of the power of language to construct and mediate experience. Both Lolita and Ulysses are fictional texts which intentionally refer to their own fictionality. In Ulysses, Joyce draws attention to the text’s structure through the ways in which he changes narrative style from section to section. By continuously introducing not only different perspectives from which the text is written, but also different genre conventions, as well as literary styles, the reader’s experience of the text is often disrupted by the multiplicity of voices and styles to which he or she must adapt in the reading process. Just as in her own passage of insomnia, Molly breaks from one train of thought to another, at times interrupted by goings on of the material world inside and outside of her bedroom, the modernist text often brings readers to awareness that they are indeed reading a text, disrupting the flow of thought.

Insomnia disallows the drift of thoughts into the unconscious state of sleep. Likewise, in the metafictional text, the reader is never able to become fully, but only temporarily immersed in that flow, much like the insomniac, as he or she is repeatedly jolted out of it when the novel draws attention to its own fictional structure. In the modernist text, sleep becomes symbolic of complacency and lack of agency. Characters who desire sleep, like Gloria in Fitzgerald’s Beautiful and the Damned or Mrs. Henderson in Dorothy Richardson’s Pilgrimage desire withdrawal from the world, an escape, and want to cede control of their bodies to the control of
others. But, as Nabokov asserts in his description of preparation for sleep as akin to “[tottering] to the nearest euthanasium” (Speak 108), complacency and lack of vigilance are dangerous indeed. Such complacency, when perhaps developing new technologies like exploding shells and mustard gas without considering their consequences, or lack of agency, such as Americans felt in their role regarding world affairs after World War I (leading to the “restless” generation that I discuss in the previous chapter) or Scrope in The Soul of a Bishop feels with regard to the role of the Church in World War I society, must be avoided. Sleep may be a pleasant return to the womb as Fitzgerald describes it earlier in this chapter, but it is also akin to inertia and death, an ultimate state of vulnerability and helplessness. For this reason, the modernist text encourages the reader to stay awake and remain vigilant.

Nabokov repeatedly uses metafiction as a device in Lolita, as narrator Humbert often draws attention to the fictionality of his story. Where Joyce manipulates the reader through changes in style and perspective, Nabokov does so through his use of Humbert’s admissions of his own “filling in the gaps” when recalling events, as well as through his use of often absurd, and therefore, markedly unrealistic language when naming characters and places. With regard to Humbert’s admission of his authorial license within the text, he reconstructs a letter written to him by his second wife and Lolita’s mother, Charlotte Haze. The letter is presented in the text as a separate entity, set apart through the use of a smaller sized font. However, despite the apparent transcription of this letter, Humbert writes:

What I present here is what I remember of the letter, and what I remember of the letter, I remember verbatim (including that awful French). It was at least twice longer. . . . There is just a chance that “the vortex of the toilet” (where the letter did go) is my own matter of
fact contribution. She probably begged me to make a special fire to consume it. (68-69)

Just as the reader is lulled both into Charlotte’s thoughts and comes to trust Humbert’s faithful transcription of the letter, Humbert admits that he likely made his own edits, reminding us that this “verbatim” letter is, in fact, highly modified and the narrator’s own memory of it is faulty at best. This type of jarring realization is similar to the incomplete thought drift of the insomniac, where he or she can be completely immersed in a flow of thought leading slowly towards sleep. Just when the flow feels reliable, an interruption occurs to break the sense of serenity.

**The Vigilant Reader**

How, then, does this insomniac structure apply to the reader? While thus far I have talked about structural formalities of a text as being insomniac, it is also important to note that the text goes far beyond just mimicking insomnia through allusions to sleep and waking, focus on an individual stream of consciousness and so forth. More significantly, the text enables the reader to feel as an insomniac does. Bryony Randall argues that when one remains aware of the passage of time during reading, “the reader’s attention will only be partially engaged with the text”; however, “being immersed in the time the text describes, will be a kind of all-embracing attentiveness, perhaps even involving of self” (166). Take for example the aforementioned passage from *Ulysses* in which Molly has insomnia and readers follow along her train of thought. As one reads the passage, one does not just note that Molly has insomnia; one actually experiences it. As Molly’s thoughts are heard in the mind of the reader, the reader, not Molly, becomes the one with disjointed, slippery images racing through his or her mind. The reader shares Molly’s awareness
of time only because she (not the reader) notes its passing. The lack of punctuation in 
the final section of the novel creates a sense of urgency and desperation (for the pause 
of sleep), and successfully drags the reader along at a rapid pace.

Similarly, metafictional devices also prevent the reader’s full lulling into a 
reading of the text. Within the metafictional text, the world of the text is never fully 
stable, just as consciousness itself may be unstable when one has insomnia. During a 
period of insomnia, a reader may start on one train of thought, ostensibly on his or her 
way to the “drift” that eventually becomes sleep. At this point, one of two outcomes 
may occur. The insomniac may either unknowingly fall asleep, only to reawaken 
with no knowledge of having slept, or the insomniac may find himself or herself 
jolted out of this train of thought, perhaps through rolling over in bed or catching a 
glimpse of the clock. Molly’s attention to church bell’s tolling is an excellent 
example of this return to awareness of the material world.

Conclusion

Modernist literary texts are contextually related to sleep through their 
temporally situated relationship to both waking and sleeping. Further, much as 
insomnia has an inevitable eventual end, but an idiosyncratic one, these texts both 
point to and question the possibility of their own perseverance beyond the content of 
the text itself, as they end with an image of the language of the text reaching out to 
the future with no stable and predictable consequence or termination. Additionally, 
the experience of reading the insomniac text serves the dual function of immersing a 
reader in the text, yet reminding the reader that he or she is essentially only 
encountering a text, not a different state of consciousness. The reader is never fully
able to lose his or her own subjective identity during the reading of the metafictional text. These texts display an anxiety over temporality, often experienced by the insomniac, as well as a sense of the past, present, and future converging in a singular time and space. In short, the experience these authors had with insomnia structured their understanding of the relationship between time, memory, and thought, as well as our understanding of our own consciousness and ability to be aware of its functioning. Such revelations are made possible through the experience of insomnia.

For numerous reasons, all of the texts I have discussed in this chapter exemplify what I am referring to as the “insomniac structure” of the modernist text. Modernism needed insomnia for many reasons. First and foremost, insomnia becomes a device through which the text becomes not only a text, but an experience. World War I brought about the revelation that words alone cannot convey the complexity of experience. Only experience itself (as art) can even attempt to replicate experience. Specifically, insomnia is an experience of the body, and, as Woolf argues, experiencing the world through a consciousness of one’s body, which she asserts comes through illness, alters perceptions in significant ways. It makes us aware of our subjectivity, as bodies, but also allows us a more actively authorial role in shaping our perceptions and understandings of the world and people around us. Further, insomnia allows authors and their characters the solitude necessary to reflect on the world and develop empathy, necessary both to the development of characters and the function of the author as creator the textual world. The era preceding the Modernist period was one of rapid technological development, and development and action without reflection are problematic, as one creates without considering the
consequences of that creation. The modernist text reminds us to reflect, and through the device of insomnia, forces its characters and readers to do. The modernist text does not allow its readers to sleepwalk through it—its structure itself requires us to stay quite awake, jarring us out of any complacent acceptance of the textual world, just as we must avoid such complacency in our “real” lives. We cannot even take language for granted anymore, much as the text and insomnia itself reveal to us the failure of simplistic definitions and associations, as words explode into multiple possibilities and meanings. Inasmuch as language structures our experience of the world, the modernist text reminds us that the world is infinitely complex and must never be viewed from just one perspective. By becoming, largely through the use of insomnia, an experience for readers, it emphasizes the fact that experience itself is never singular and can be shared, asserting the importance of the ability to view the world through someone else’s perspective, lest we risk relaxing too much into our own and lulling ourselves out of awareness of the world around us.
CONCLUSION

In 2004, the BBC premiered a reality show called Shattered. The premise of the show was simple: expose people to severe sleep deprivation, have them compete against each other to perform various tasks, and record the whole process. The purpose of the show was to have contestants stay awake for just over a week, up to 180 hours (“Shattered” Channel 4), though some reports maintain that the contestants were allowed up to two hours of sleep a day (“Shattered” UK Game Shows). Throughout the week, contestants were eliminated based on their competence during the various tasks they performed, including memory and coordination activities. The winner of the show could earn up to £100,000, but for each instance in which the individual fell asleep for more than ten seconds outside of break times, the prize was reduced by £1,000 (the winner walked away with £97,000 in total) (“Shattered” Channel 4). The show was not without its share of controversy, especially after one contestant, a 21 year old woman, voluntarily withdrew from the show after consulting with psychologists (“Channel 4”). The show ended with a “sleep off,” during which the three final contestants were put to bed. The contestant who managed to remain awake while in bed the longest, Clare Southern, won by keeping herself alert for almost two hours longer than the other two finalists; she reportedly did so by “[singing] to herself” and “playing blinking games” (Chapman).

A show such as this essentially inverts discursive presentations of insomnia during the Modernist period. Where I have argued that insomnia is a form of vigilance, this type of extended insomnia so exhausted participants as to make them
unsure of themselves and their surroundings; the only vigilance here is that of the cameras. Where I have looked at insomnia as a form of isolation and solitude, this show exposes insomnia, putting it on view for the whole world. Where I have looked at insomnia as a form of heightened awareness of both body and mind, this show rendered its participants wakefully insentient. Where I have looked at insomnia as productive of a different type of thought, this show rendered insomnia so intense as to be thoughtless. And, where I have looked at insomnia as a form of resistance to capitalist paradigms of activity and productivity, this show makes insomnia itself the means of profit.

In my final chapter, I argued that Modernism needed insomnia, as a sort of bastion of individuality in an increasingly rationalized and dehumanized world. It represented, for the Modernists, a space and time unique to the afflicted individual, affording him or her both time for contemplation and pursuit of individual interests and reflections. It both exposed and resisted social and cultural expectations placed on the individual. A show such as this effectively took that time and space away from the insomniac, co-opting the time and space of insomnia for profit instead. Insomnia is no longer something to be used by the individual, but to be used by those seeking to profit. The title *Shattered* comes to represent this new type of insomniac, robbed of individuality and agency, no longer solidified in character through insomnia, but broken by it, dispersed like so many pixels on a TV screen. This new insomniac no longer uses insomnia to resist exploitation and subjection, but instead embraces both.
Sleep researchers Steve Kroll-Smith and Valerie Gunter define sleep as “a nonsocial somatic state” which leaves us “unaware of a world outside the body” (346). “Sleepiness,” they argue, “is being colonized as a partial state of consciousness requiring social and individual attention” (347). Paradoxically, a condition that makes us “unaware” now requires us to be just that. Additionally, our state of unawareness to the outside world becomes an issue to which the outside world must be made aware. While they situate this colonization of sleepiness in contemporary times, I would argue this project began much earlier, primarily in the nineteenth century. As is typically the case with any form of “colonization,” some will resist. Insomnia afforded the Modernists resistance to the colonization of sleep. Insomnia, despite our best efforts to this day, can at best be managed, but certainly not controlled. For the insomniac, there is no guarantee, no matter what measures are taken, that a good night’s sleep will come. In an era of increasing normalization, generalization, observation, and control, during which privacy and unregulated time diminished as technology and science flourished, insomniacs shirked regulation and discipline. Insomnia reminds modernist authors and their audiences of the dangers of permitting oneself to lapse into comfortable unawareness of the world around them and their role in shaping it.
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